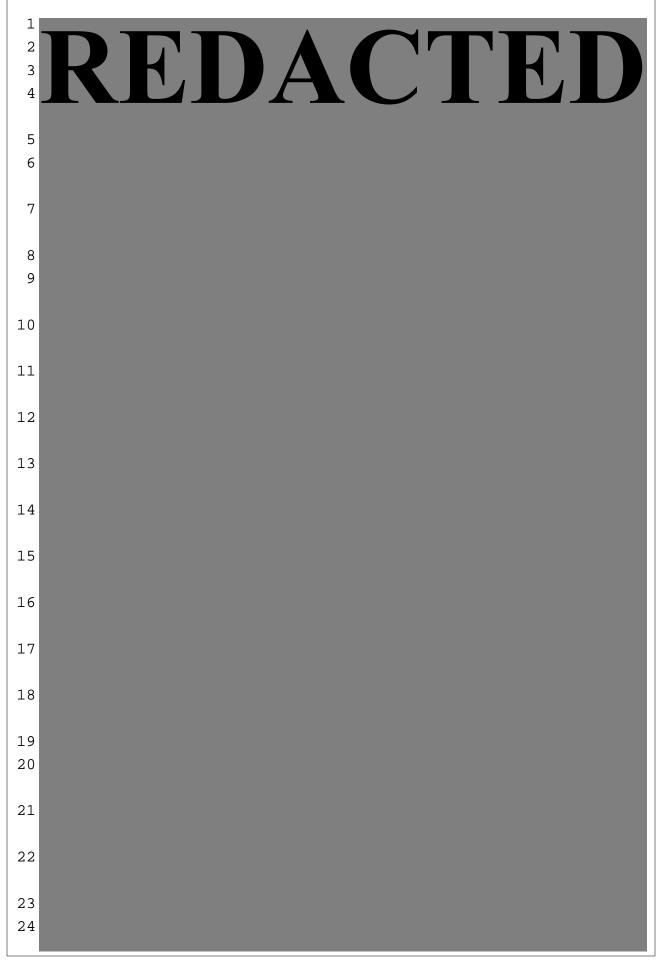
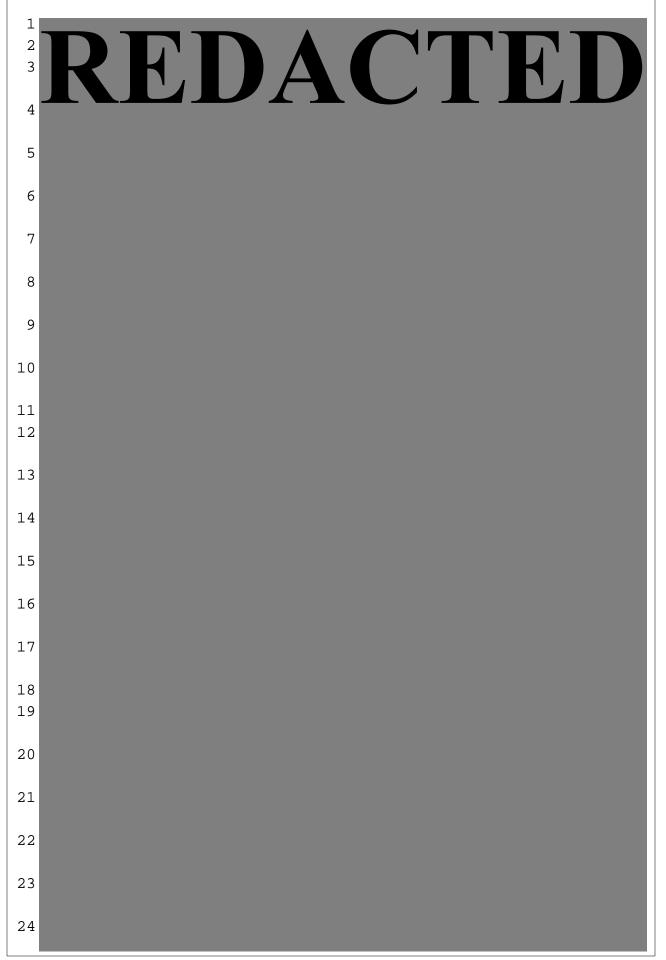
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UNITED STATES DISTRICT COURT
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           FOR THE NORTHERN DISTRICT OF OHIO
 3
                     EASTERN DIVISION
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 5
    IN RE: NATIONAL
                                 : MDL No. 2804
    PRESCRIPTION
 6
    OPIATE LITIGATION
                      _{---}: Case No.
 7
                                 : 1:17-MD-2804
    THIS DOCUMENT RELATES
    TO ALL CASES
                                : Hon. Dan A. Polster
10
                   HIGHLY CONFIDENTIAL
11
       SUBJECT TO FURTHER CONFIDENTIALITY REVIEW
12
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14
            Videotaped deposition of LAURIE A. ZACCARO,
    held at the offices of Buckley King, 1400 Fifth
15
16
    Third Center, 600 Superior Avenue East, Cleveland,
17
    Ohio 44114, on Wednesday, January 16, 2019,
    commencing at 8:58 a.m., before Carol A. Kirk,
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19
    Registered Merit Reporter and Notary Public.
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23
               GOLKOW LITIGATION SERVICES
            877.370.3377 ph | 917.591.5672 fax
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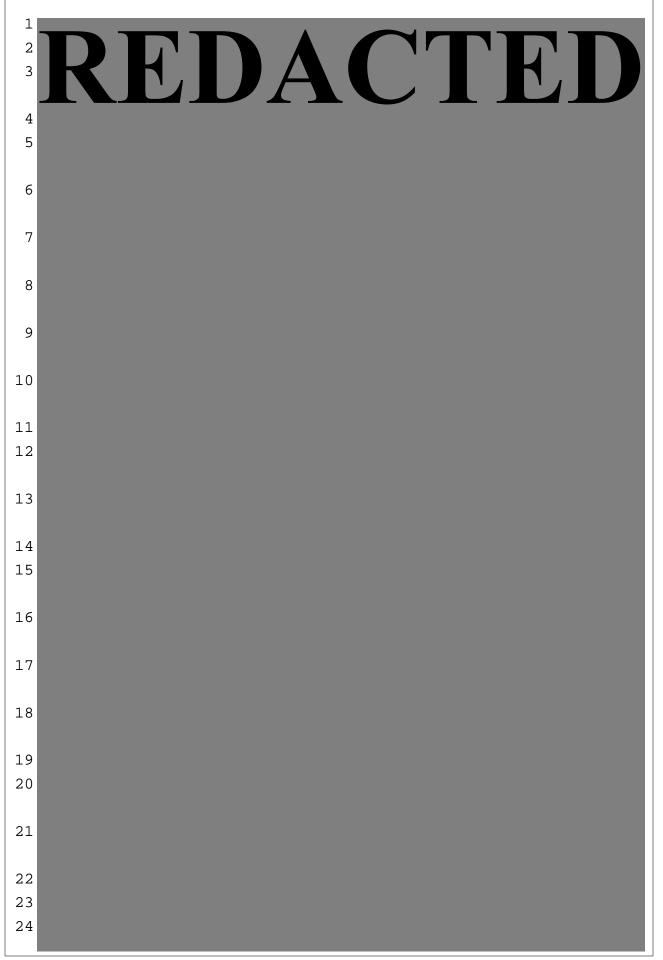
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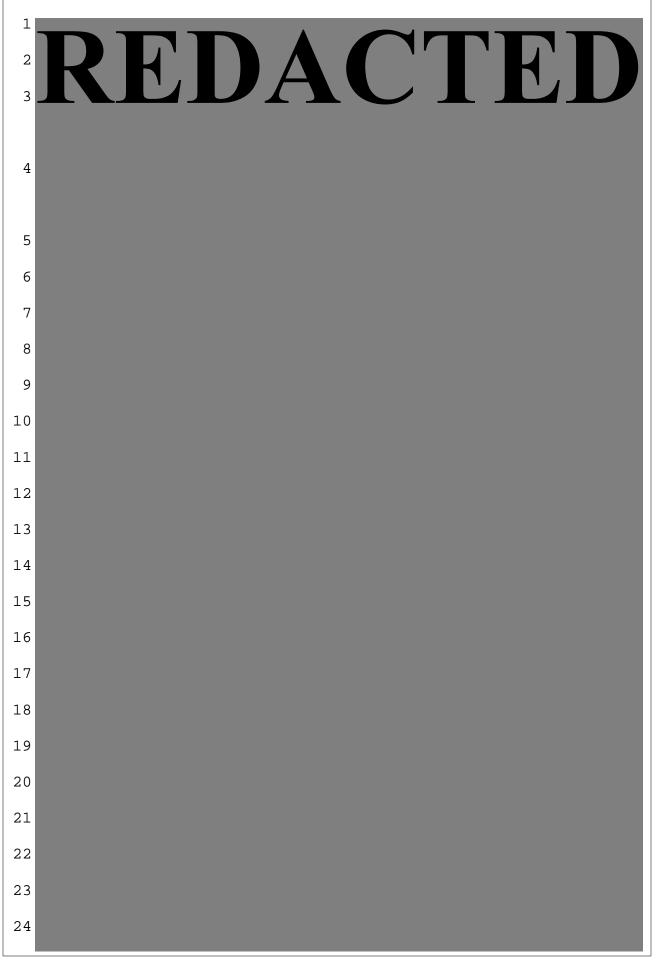
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         Rick Christian, Trial Technician
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         Frank Stanek, Videographer
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| 1  | VIDEOTAPED DEPOSITION OF LAURIE A. ZACCARO  |      |
|----|---|------|
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| 3  | WITNESS                                     | PAGE |
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| 2  | PROCEEDINGS                              |
| 3  |  |
| 4  | THE VIDEOGRAPHER: We are now on          |
| 5  | the record. My name is Frank Stanek. I   |
| 6  | am a videographer for Golkow Litigation  |
| 7  | Services. Today's date is January 16,    |
| 8  | 2019, and the time is 8:58 a.m.          |
| 9  | This video deposition is being           |
| 10 | held in Cleveland, Ohio in re of         |
| 11 | National Prescription Opiate Litigation  |
| 12 | for the United States District Court for |
| 13 | the Northern District of Ohio, Eastern   |
| 14 | Division.                                |
| 15 | The deponent is Laurie Zaccaro.          |
| 16 | Will counsel please identify             |
| 17 | themselves for the record.               |
| 18 | MR. GADDY: Jeff Gaddy with Levin         |
| 19 | Papantonio for the Plaintiffs.           |
| 20 | MR. LEVINE: Mark Levine on behalf        |
| 21 | of Walgreens and the witness.            |
| 22 | MS. MORRISON: Kristin Morrison           |
| 23 | from Jones Day on behalf of Walmart.     |
| 24 | THE COURT REPORTER: Is there             |

```
anyone on the phone?
 1
 2
                  THE VIDEOGRAPHER: And the court
 3
            reporter is Carol Kirk and will now
 4
            swear in the witness.
 5
 6
                   LAURIE A. ZACCARO
 7
    being by me first duly sworn, as hereinafter
 8
    certified, deposes and says as follows:
 9
                   CROSS-EXAMINATION
10
    BY MR. GADDY:
11
            Q. Good morning, Ms. Zaccaro.
12
            A. Good morning.
13
            Q. Could you state your name for us,
14
    please.
15
            A. Laurie Zaccaro.
16
            Q. And you work at Walgreens,
17
    correct?
18
            A. Yes, I do.
19
                  Okay. How long have you been with
            O.
20
    Walgreens?
21
            Α.
                  Twelve years.
22
            Q.
                  As a function of your job with
23
    Walgreens, have you ever had to give testimony
24
    like this before?
```

- 1 A. Yes.
- Q. Okay. In a deposition context or
- 3 trial or both?
- 4 A. Deposition.
- 5 Q. Okay. In what context was that?
- 6 A. It was with regards to safety and
- 7 security concerns in an outside parking lot of
- 8 one of our inner city stores.
- 9 Q. Okay. Did it involve some lawsuit
- 10 that was filed against Walgreens?
- 11 A. Yes.
- 12 Q. Okay. Did that case ever go to
- 13 trial that you know of?
- 14 A. I'm unaware.
- 0. Okay. Outside of that, have there
- 16 been any other occasions in which you've given a
- 17 deposition before?
- 18 A. No.
- 19 Q. Okay. In the course of your work
- with Walgreens, have you ever had the occasion
- 21 to testify at trial?
- A. No, I have not.
- Q. Okay. In the course of your work
- 24 with Walgreens, have you ever had the

- 1 opportunity to meet with or work with any law
- 2 enforcement?
- 3 A. Yes.
- 4 Q. Okay. Can you kind of describe
- 5 for me the circumstances generally in which that
- 6 would have occurred, and then maybe we can
- 7 follow up with some specifics.
- 8 A. With law enforcement, I support
- 9 external investigations that they may be working
- 10 on. And I also do ex- -- I'm -- like support
- 11 with DEA drug backs and take-backs and law
- 12 enforcement in community events.
- 0. Okay. So I guess one thing I
- 14 should make clear is, you work in loss
- 15 prevention, correct?
- 16 A. Correct. I'm an asset protection
- 17 manager.
- 18 Q. Okay. And has that been your
- 19 title the entire 12 years you've been at
- 20 Walgreens?
- 21 A. Yes, it has.
- Q. Okay. I see references within
- 23 some of the documents that I've looked at to
- 24 district loss prevention managers or regional

- 1 loss prevention managers.
- 2 How does -- where does asset
- 3 protection manager fall within there?
- 4 A. Since my position with the
- 5 company, our titles have changed --
- 6 0. Okay.
- 7 A. -- a handful of times from loss
- 8 prevention supervisor, district loss prevention
- 9 manager, asset protection managers. All of our
- 10 responsibilities have always stayed the same.
- 11 Our titles have changed more than once, though.
- 12 Q. Okay. During your 12 years at
- 13 Walgreens, has the amount of responsibilities
- 14 that you have changed, as far as the number of
- 15 stores or the number of people that you're in
- 16 charge of?
- 17 A. Yes.
- 18 Q. Okay. Kind of walk me through
- 19 that progression, if you don't mind.
- 20 A. When I first started with the
- 21 company, we were in larger districts where I had
- 22 one district of -- if I remember correctly, 26
- or 27 stores. In the last few years, there have
- 24 been some realigning with districts and sizes.

- Now the districts average anywhere
- 2 from 12 to 18 stores in a district. And I'm
- 3 responsible for four districts currently and
- 4 have been for at least the last three years,
- 5 three or four years, I believe.
- 6 O. Okay. Okay. So you started with
- 7 Walgreens approximately 2006; would that be
- 8 right?
- 9 A. December 29, 2006. Very end of
- 10 the year, yes.
- 0. Okay. So from 2006 until how
- long, until what year, would you say you had
- about one district and 26 to 27 stores?
- 14 A. The first eight years, eight or
- 15 nine. We realigned our districts and did the
- 16 shifting in the last -- it was three or four
- 17 years. I can't remember.
- Q. Okay. So from '06 through
- 19 approximately 2013, 2014?
- 20 A. Yes.
- 21 Q. And when you -- in 2013, 2014 when
- 22 you began to oversee four districts, was that a
- promotion, or was that just a realignment?
- 24 A. It was just realignment.

- 1 Q. Okay. And what areas do you -- do
- 2 your stores cover? And I guess first tell me
- 3 from '06 to the '13 and '14 range and then post
- 4 then.
- 5 A. From '06 to the '13-'14 range, I
- 6 was in the Cleveland West district, which
- 7 covered -- I don't know how familiar you are
- 8 with Cleveland, but to the north along the Lake
- 9 and to west as far as Norwalk, which is almost
- 10 the central, northern part of Ohio, so -- and
- 11 then after that, once we shifted to multiple
- 12 districts, I now cover the north part of
- 13 Cleveland, the south part of Cleveland
- 14 currently, and then the north and south part of
- 15 Columbus.
- 16 Q. Okay. Is there a Walgreens office
- 17 that you work out of here in Cleveland?
- 18 A. There is an area office located in
- 19 Warrensville Heights, Ohio.
- 0. Okay. About how many folks are in
- 21 that office?
- 22 A. Maybe -- well, we have five
- 23 districts, our director, our healthcare
- 24 supervisor and two admins. So each district

- 1 manager, five, six, seven, eight, nine -- ten or
- 2 eleven of us.
- Q. Is it primarily loss prevention
- 4 folks in that office?
- A. No, sir, it is not.
- 6 Q. Okay. Okay. So your current
- 7 territory includes Cleveland, it also includes
- 8 some areas of Columbus?
- 9 A. Correct.
- 10 Q. And was there another city that I
- 11 missed?
- 12 A. Cities down through between --
- 13 there's Mansfield is -- I go to Mansfield
- 14 locations and the suburbs, a lot of suburb
- 15 municipalities.
- 16 Q. Okay. Let me see if I can go back
- 17 to where I started originally and then I got
- 18 sidetracked. But I was asking you about meeting
- 19 with law enforcement.
- 20 A. Yes.
- Q. Tell me what agencies -- and let
- 22 me first focus on the -- more the enforcement
- 23 side.
- 24 A. Okay.

- 1 Q. And then we can talk about the
- 2 community involvement side.
- 3 A. Okay.
- 4 Q. So as it relates to enforcement,
- 5 what agencies have you had the occasion to work
- 6 with during the course of your time at
- 7 Walgreens?
- 8 A. Ohio Board of Pharmacy primarily.
- 9 And then I -- with matters with external law
- 10 enforcement support, it varies. It depends on
- 11 what they might reach out to us for. It could
- 12 be identity theft. It could be prescription
- doctor shopping with customers. It could be
- 14 with doctors and prescriptions, and I'm -- my
- involvement with that is primarily getting them
- 16 the evidence that is subpoenaed for matters that
- 17 they're investigating.
- 18 Q. Okay. So --
- 19 A. It could be video. It could be
- 20 documents.
- Q. -- is that primarily -- is that
- 22 generally with local law enforcement or is that
- 23 federal agencies or both?
- A. Primarily that's with Ohio Board

- 1 of Pharmacy, with their investigators.
- Q. Okay. Well, does the Ohio Board
- 3 of Pharmacy investigate the identity theft type
- 4 crimes that you were talking about?
- 5 A. No. That's more your local law
- 6 enforcement, but I don't have as many of those
- 7 as I do with the Board of Pharmacy.
- Q. What's your typical case with the
- 9 Board of Pharmacy?
- 10 A. Theft.
- 11 Q. Of what?
- 12 A. Drugs.
- 13 Q. Okay.
- 14 A. They work with our pharmacy. I do
- investigations on the front end merchandise of
- 16 the stores with cash, cigarettes, merchandise.
- 17 I conduct those investigations myself. But when
- 18 it's matters with anything with the pharmacy, we
- 19 notify the board and we work with the
- 20 investigators for pharmacy.
- Q. Okay. So -- excuse me. Okay. So
- just so we're clear, front end of the store is
- everything that's not prescription drugs?
- A. Correct.

- 1 Q. Is that fair?
- 2 A. Correct.
- Q. Okay. And so anything that's
- 4 behind the counter that requires a prescription
- 5 would be something that's investigated by the
- 6 Board of Pharmacy?
- 7 A. Yes.
- 8 Q. Okay. And do you work with the
- 9 Board of Pharmacy, or is it more you supplying
- 10 them information? Do they have their own
- 11 investigators?
- 12 A. It varies. I work with them, with
- the internal things that they can't do that's
- 14 there, like once we put -- once we alert them,
- 15 notify them, we talk about where our confirmed
- 16 losses are, and then they will either do what
- 17 camera and video they need to put in place or I
- 18 may shift around -- if it's Walgreens cameras
- 19 that are being used, I will review that video.
- 20 They will review their own video. It's in
- 21 connection together, really, the investigations
- 22 are.
- Q. Okay. Have you worked with the
- 24 Board of Pharmacy on these types of issues your

- 1 entire 12 years at Walgreens?
- 2 A. Yes, I have.
- Q. Okay. Okay. I want -- and then
- 4 the other issue that you brought up was your
- 5 work with law enforcement in the community
- 6 setting, correct?
- 7 A. Correct.
- Q. Okay. And I know you've been
- 9 in -- I think you've told us you've been
- 10 involved in some of the drug take-back days that
- 11 the DEA puts on?
- 12 A. Yes.
- Q. Okay. Anything else in that
- 14 regard?
- 15 A. No.
- 16 Q. Okay. Have you had any other
- occasion other than those community events to
- 18 work with the DEA?
- 19 A. I believe in the past there was a
- 20 meeting that they've done with Walgreens, with
- 21 compliance and making sure proper processes are
- followed and procedures are followed with the
- 23 reporting and just making sure that we're all
- 24 working together on that. There has -- I'm

- 1 going back and I'm vaguely remembering, but I've
- 2 had interactions with them for meetings, but
- 3 nothing with investigations --
- 4 Q. Okay. Do you recall --
- 5 A. -- that I can recall.
- 6 Q. Excuse me. And I'm sorry for
- 7 interrupting you.
- A. That's okay.
- 9 Q. Do you recall attending any
- 10 meetings with the DEA?
- 11 A. I believe there was at least one
- 12 that I can recall that they were at our office,
- and it was more about the processes of
- 14 reporting, more informative.
- 15 O. Processes of reporting what?
- 16 A. Reporting losses, reporting if
- 17 there is fraudulent prescriptions and a process
- 18 they wanted us to follow, which I wouldn't be
- 19 involved in that. That would have been with
- 20 pharmacists to follow, but they give the
- 21 information to us, and our pharmacy supervisors
- 22 would have been there to then inform our
- 23 pharmacy managers and cascade that, making sure
- 24 that they're aware of the processes and

- 1 following the processes.
- Q. Okay. And this kind of segues
- 3 into what I'm wanting to get into next, because
- 4 I want to make sure I kind of have an
- 5 understanding of exactly what your role is and
- 6 what your duties are.
- 7 Do you recall approximately when
- 8 that DEA meeting was?
- 9 A. No, I don't. It's been several
- 10 years.
- 11 Q. Okay. More than three years ago?
- 12 A. Yes.
- Q. Okay. More than five years ago?
- 14 A. Maybe.
- 15 O. Okay.
- 16 A. I don't know.
- 17 Q. Okay. And what I think I heard
- 18 you just say is that some of the topics that you
- 19 remember from that meeting involved reporting
- 20 thefts of prescription drugs to the DEA,
- 21 correct?
- 22 A. That is my area of work. I do
- 23 theft and losses.
- Q. Okay. And -- okay. And the other

- 1 area that I think I heard you say was covered in
- 2 that meeting would have been identifying
- 3 fraudulent prescriptions?
- 4 A. I believe. I can't remember what
- 5 the agenda was. I know it was an informative
- 6 meeting of the DEA outlining processes for -- if
- 7 I recall correctly. It had a lot to do with --
- 8 there was a time I believe -- and I'm vaguely
- 9 remembering -- of how they wanted us to -- or
- 10 how they wanted the pharmacists, rather, to
- 11 report suspicion with fraudulent prescriptions
- 12 and notifications.
- 13 Q. That issue that you just said, the
- 14 pharmacists reporting suspicion with fraudulent
- 15 prescriptions, does that fall under your
- 16 purview?
- 17 A. No, it does not.
- 18 - -
- 19 (Walgreens-Zaccaro Exhibit 1 marked.)
- 20 - -
- Q. Okay. I'm going to show you what
- 22 I've marked as Exhibit Number 1. This is a
- 23 resumé and a partial personnel file that was
- 24 provided to me.

- 1 Do you recognize that?
- 2 MR. GADDY: This is P-WAG-2414.
- A. Yes. This is my past reviews.
- 4 Q. Okay. And I'm going to primarily
- 5 focus on the resumé that's on front right now.
- 6 Do you have any idea how up to date this is?
- 7 A. This was updated -- it's been
- 8 quite some time. I haven't done anything with
- 9 my resumé in a few years.
- 10 Q. Okay. So it looks like you have a
- 11 little bit of a history in law enforcement?
- 12 A. I do.
- 13 Q. Okay.
- 14 A. Yes.
- 15 Q. Just kind of walk me through, if
- 16 you don't mind, your history in law enforcement
- 17 and what you did before you got with Walgreens.
- 18 A. So prior to Walgreens, I was a
- 19 parole officer for the State of Ohio for
- 20 approximately six years. Prior to that, I was a
- 21 criminal bailiff for Lucas County probation,
- 22 which is a felony court, and I did that for a
- 23 couple years.
- Prior to being a bailiff, I was

- 1 with the Women's Resource Center in Northern
- 2 Michigan for about 18 months, I believe, where I
- 3 was an advocate for victims of domestic abuse,
- 4 assisting them through the criminal justice
- 5 system as victims. And prior to that, I was a
- 6 probation officer with Lucas County adult
- 7 probation for Common Pleas Courts there.
- Q. Okay. The most recent stint that
- 9 you spent as a parole officer, where was that?
- 10 A. Summit County --
- 11 Q. Okay.
- 12 A. -- which is Akron area.
- 0. Okay. And you did that, it looks
- 14 like, for about six or seven years?
- 15 A. Correct.
- 16 Q. And just kind of generally what
- were your job duties in that role?
- 18 A. I supervised parolees coming out
- 19 of institutions for criminal offenses, managed
- them, making sure that they were referred to
- 21 where they needed to do -- be for treatment,
- 22 maintaining work, approved housing wherever they
- 23 were residing.
- 24 O. Okay. Did that involve -- would

- 1 these folks be on a probation type situation
- where they had conditions that they had to meet?
- 3 A. Yes.
- Q. Okay. And you would be in charge
- of making sure they met those conditions?
- 6 A. Yes.
- 7 Q. Okay. And examples of those types
- 8 of conditions would be restrictions on housing
- 9 and where they could live?
- 10 A. Yes.
- 11 Q. Would there be drug use or drug
- 12 testing type restrictions?
- 13 A. Yes. It could be drug. It could
- 14 be anger management, depending on the nature of
- 15 their crimes that sent them to prison.
- 16 Q. Okay. What types of offenders did
- 17 you supervise?
- 18 A. Anything from thieves to
- 19 murderers.
- 20 O. Okay.
- 21 A. We had a sex offender unit. So I
- 22 was not in the sex offender unit. Mine was more
- 23 robberies, burglaries, assaults, murders.
- Q. Okay. Did you have drug offenders

- 1 that you supervised?
- 2 A. Yes. I'm sorry. I did have drug
- 3 offenders as well.
- 4 Q. Okay. And as far as any component
- of supervision that required drug testing, how
- 6 did that work?
- 7 A. We had drug testing in our office,
- 8 and any time any offenders would come in for
- 9 drug testing or any time they would come in for
- 10 office visits, I would drug test them. It was
- 11 random. We had ability to test out in the
- 12 fields when we were doing their visits in home.
- 13 I never did that personally.
- Q. Okay. If there were --
- MR. HOUSTON: I'm sorry. I
- apologize for the interruption. I just
- wanted to state my appearance on the
- 18 record.
- 19 THE COURT REPORTER: Sorry.
- You're going to have to speak up.
- MR. GADDY: A little bit louder,
- please. A little bit louder, please.
- MR. HOUSTON: I'm sorry. This
- is -- yeah. I just wanted to state my

- appearance on the record. I apologize
- for the late arrival. This is Zeno
- 3 Houston from Arnold & Porter on behalf
- 4 of the Endo and Par Defendants.
- 5 BY MR. GADDY:
- 6 Q. From time to time would your job
- 7 duties as a parole officer require you to issue
- 8 violation reports for people that you were
- 9 supervising?
- 10 A. Yes.
- 11 Q. Okay. What were the types of
- things that could cause individuals to violate
- 13 their parole?
- 14 A. New criminal offenses. It could
- be non-compliance with their drug and alcohol
- 16 treatment or any anger management counseling
- 17 that they're participating in. It could be
- 18 because they moved without an approved address,
- 19 we have to go -- we would have to have gone and
- inspect the homes and make sure they were
- 21 approved.
- 22 It could be -- if there was
- 23 restitution, if they had to pay restitution and
- 24 they weren't paying restitution. It could be

- 1 whatever their conditions were that they were
- 2 non-compliant with.
- Q. During your time as a parole
- 4 officer, did you have individuals that you
- 5 supervised that you saw struggle with drug abuse
- 6 or drug addiction?
- 7 A. Yes.
- Q. Okay. Was that a common
- 9 occurrence amongst folks that you supervised?
- 10 A. I don't know how you would define
- 11 "common." Did it happen? Yes. Did it happen
- 12 enough? Yes. Some came out, and some got it
- 13 right. Some did not.
- Q. Okay. During your time as a
- 15 parole officer, did you supervise individuals
- 16 who struggled with the use or abuse or addiction
- 17 to opioids?
- 18 A. Yes. But in that time, it was
- more meth, the meth phase was our biggest
- 20 challenge.
- Q. Okay. And that was in the 2000,
- 22 2006 time frame?
- A. Yeah.
- Q. Okay. So we move on to your time

- 1 at Walgreens, and what I want to do is go
- 2 through some of these bullet points and just
- 3 kind of ask you to expand on them a little bit.
- 4 A. Okay.
- 5 Q. The first bullet point that you
- 6 have here is that you "managed a region of
- 7 pharmacy retail stores" and you've already told
- 8 us about that, right?
- 9 A. Mm-hmm.
- 10 Q. Next thing you say you is you
- 11 "Partnered with area directors, district
- 12 managers, and operations trainers for the
- 13 successful execution of a company business plan
- 14 and/or initiatives."
- 15 Can you kind of explain what you
- 16 mean there?
- 17 A. Supporting one another with
- 18 whatever initiatives were coming down. And
- 19 mostly it was in the operations aspect,
- 20 different ways of doing things, changing things.
- 21 It might have been systems. It could have been
- 22 changes with our realigning, supporting one
- 23 another that way.
- Q. What do you mean by "operations"?

- 1 A. Operations is more the front end
- of the store and the day to day -- it's
- 3 pharmacy, too, I should say, where they're more
- 4 focused on the operations, the profit, the
- 5 sales, the receiving, the merchandising; whereas
- in our department, we're focused on theft,
- 7 losses, supporting them with compliance matters.
- Q. Okay. The next bullet point, you
- 9 say, "Identify shrink priorities and analyze,
- 10 develop, and implement shrink reduction plans."
- 11 Do you see that?
- 12 A. Yes.
- Q. What is shrink?
- 14 A. Shrink is losses in our retail
- 15 stores, what we should have compared to what we
- 16 don't have, the variance there in the -- that's
- 17 unaccounted for, and we support finding out how
- 18 it happened, why it happened and what we can do
- 19 to shift our focus from preventing it again.
- 0. Okay. Generally speaking, shrink
- 21 is theft; is that fair?
- 22 A. It could be theft, but we also
- incur a lot of shrink in losses with paper
- 24 shrink because our own processes may not be

- 1 getting -- being followed.
- 2 Q. Can you give me an example of
- 3 that.
- 4 A. Do you want a front end or a
- 5 pharmacy?
- 6 Q. Why don't we do the pharmacy.
- 7 A. A paper shrink in pharmacy might
- 8 be an order was received and it is posted in our
- 9 inventory management system, and if our staff,
- 10 whether it be technicians who did the receiving
- of that order or whether it was a pharmacist who
- did the receiving of that order, if they don't
- 13 post it and it doesn't get posted correctly and
- 14 timely, it's paper shrink. It's saying that we
- 15 never received it --
- 0. So the books don't --
- 17 A. -- but yet we paid for it.
- 18 Q. So the books don't match?
- 19 A. Correct.
- 0. Okay. So that's not a situation
- 21 where you have actual loss. That's a situation
- 22 where you -- you know, kind of an accounting
- 23 error type of issue?
- A. Paper shrink, we refer to that as.

- Q. Okay. And is one of your roles as
- 2 a loss prevention person with Walgreens to
- 3 identify that and get it corrected?
- 4 A. I support in identifying it, yes.
- 5 Q. Okay. Well, is the -- would it be
- 6 fair that the primary function that you serve is
- 7 product shrink?
- 8 A. Yes.
- 9 Q. Okay. And --
- 10 A. Cash also.
- 11 Q. Okay. Kind of describe for me
- 12 what the different roles or the different tasks
- 13 that you fulfill that kind of help with whether
- 14 it's cash or products?
- 15 A. Once it's identified -- and I'm
- 16 not in the stores identifying it on most parts.
- 17 I'm contacted after there's a process that they
- 18 follow. There are checks and balances to make
- 19 sure and confirm that it wasn't training error
- or paper error. Once it's a confirmed loss,
- 21 they will contact me, and then I will conduct
- 22 that internal investigation and interview.
- Q. Okay. What are your other
- 24 primary -- what are your other primary job

- 1 duties other than the identification of and
- 2 investigation of theft or shrink?
- A. We do -- we do do some training.
- 4 We do do some audit review compliance to prevent
- 5 losses, making sure that we're -- it could be
- 6 compliance in checking our safety and security
- 7 systems. It could be compliance in making sure
- 8 that processes are being followed.
- 9 Q. Okay. Do any of those -- any of
- 10 the training or the processes that you're -- the
- 11 training you're conducting or the processes that
- 12 you're reviewing have to do with the ordering or
- dispensing of controlled substances?
- 14 A. I do not do those trainings.
- 15 O. Okay.
- 16 A. I don't speak to those, because my
- area is loss and theft, not necessarily the
- 18 ordering and receiving. I know that there are
- 19 processes, but I can't articulate --
- 20 O. Do you have --
- 21 A. -- what they are.
- Q. Do you have any responsibilities
- whatsoever for the ordering or receiving of
- 24 controlled substances?

- 1 A. No, I do not.
- Q. Okay. Do you have any
- 3 responsibilities related to the dispensing of
- 4 controlled substances?
- A. No, I do not.
- 6 O. Do you have any responsibilities
- 7 related to the identification of fraudulent
- 8 prescriptions?
- 9 A. No, I do not.
- 10 Q. Do you have any responsibilities
- 11 that are related to the identification of
- 12 potential customers who may be engaging in
- 13 doctor shopping?
- A. No, I do not.
- Q. Do you have any responsibilities
- 16 related to making a determination as to whether
- or not a particular prescription should be
- 18 filled?
- A. No, I do not.
- 20 O. If we keep going down the list,
- 21 the next bullet point says you "conduct detailed
- 22 internal and external investigations."
- Let me stop there. Obviously
- you've told us a little bit about some of the

- 1 investigations you would conduct if you -- if
- 2 somebody identifies either paper shrink or
- 3 product or cash shrink to you, correct?
- 4 A. Correct.
- 5 Q. Okay. Do -- I've used a couple of
- 6 phrases. When I say "fraudulent prescription,"
- 7 you know what I mean by that, right? Or tell --
- 8 do you know what I mean by that?
- 9 A. I know what I -- how I define
- 10 "fraudulent prescription." I don't know if it
- 11 is the same of what --
- Q. Well, let's just use your
- 13 definition. Tell us what your definition is.
- 14 A. A fraudulent prescription to me
- is -- would be considered if a patient brought
- in a prescription that has been altered, if it
- 17 has been -- I'm aware that sometimes we have
- 18 notices from doctor's office that doesn't come
- 19 to me. I'm just aware -- made aware of them,
- 20 that maybe a prescription pad was stolen from a
- 21 doctor's office, and somebody begins, then,
- 22 writing prescriptions and falsifying
- 23 prescription signatures and doctors and
- 24 everything else. So to me, that's what a

- 1 fraudulent prescription would resemble.
- Q. Okay. And I think that's a fair
- 3 definition. So let me make sure I understand.
- 4 If somebody comes into a Walgreens store and
- 5 they have one of these fraudulent prescriptions,
- 6 it's not your job to make that determination on
- 7 the front end, correct?
- A. Correct. I don't even see the
- 9 prescriptions.
- 10 Q. Okay. If one is identified, so,
- 11 for example, if a pharmacist realizes that
- they've been handed a fraudulent prescription,
- do you ever play a role in -- do you ever get
- 14 looped into that?
- 15 A. There are occasions -- some
- 16 pharmacists will know exactly how to handle it.
- 17 Other pharmacists may contact me. They may
- 18 contact -- we used to have in place pharmacy
- 19 supervisors. They may contact the district
- 20 managers advising that "I think I suspect. What
- 21 should I do?"
- 22 And then I will -- I can give them
- 23 direction. "If you think or suspect, what have
- 24 you done? Did you call the doctor's office to

- verify it?" Which is really the only thing I
- 2 would tell them to do, call the doctor's office
- 3 to verify it before you report it to our Board
- 4 of Pharmacy.
- 5 Q. Okay. So kind of using the
- 6 decision tree that you gave us there, so a
- 7 person comes in and presents a fraudulent
- 8 prescription and this particular pharmacist
- 9 knows what to do. Would you ever hear about it
- 10 in that situation?
- 11 A. No.
- 12 Q. Okay.
- 13 A. The only time I might hear about
- 14 it is if the law enforcement reaches out to me
- 15 with subpoenas and needing copies of the
- 16 prescriptions for their purposes of their
- 17 investigation.
- 18 Q. So they might ask you to pull the
- 19 video from when the person came in?
- 20 A. Correct.
- 21 Q. They might ask you to get a copy
- of the prescription from the pharmacist?
- A. Correct.
- Q. Okay. But other than that, you're

- 1 not doing any investigation or any oversight of
- 2 that?
- A. No, I am not.
- 4 Q. Okay. So the second situation
- 5 where a person comes in, presents a fraudulent
- 6 prescription, and the pharmacist, for whatever
- 7 reason, doesn't know what to do, you may get a
- 8 phone call in those situations?
- 9 A. Yes.
- 10 Q. Okay. And what I think I heard
- 11 you just say is you would advise them to call
- 12 the doctor and see if he could verify the
- 13 prescription?
- 14 A. Take what steps that they have and
- 15 have been provided to follow and make sure you
- 16 verify it and -- I wouldn't be able to tell them
- beyond the appearance of the script or what
- 18 they're looking for in passing. I just know
- 19 sometimes what alerts them to suspect that it's
- 20 a fraudulent prescription.
- Q. Okay. And other than giving
- 22 them -- the pharmacist this information, that I
- 23 presume a pharm -- the pharmacist would --
- 24 should have access to independently, correct?

- 1 A. Correct, but some of them are --
- 2 there's a lot they do. Some of them -- some of
- 3 them are not confident. They want to make sure
- 4 they're handling it correctly. Mostly that's
- 5 what it is when they contact me. "I know I'm
- 6 supposed to."
- 7 "Yes, follow that process."
- Q. Okay. There's nothing -- there's
- 9 no information that you and you alone have that
- 10 they're having to contact you to get?
- 11 A. No.
- 12 Q. All the information that you give
- 13 them is information they could pull
- 14 independently?
- 15 A. Yes, they can.
- 16 Q. Okay. Outside of telling those
- 17 particular pharmacists that either may not know
- 18 what to do or may just want the assurance that
- 19 they're doing the right thing and providing them
- with that information, do you have any other
- 21 involvement in those situations?
- A. No, I do not.
- Q. Okay. That bullet point continues
- 24 to read, "conduct detailed internal and external

- 1 investigations." And it says, "For resolution
- of losses of pharmaceuticals." And then it
- 3 lists some other areas there.
- In what ways would you conduct
- 5 investigations for the loss of pharmaceuticals?
- A. Walgreens, we have exception
- 7 reports that capture when changes of inventory
- 8 on hands come. So part of that would be once we
- 9 identify and have a confirmed loss, then I would
- 10 do the investigation in connection with -- I
- 11 would contact the Board of Pharmacy.
- We would coordinate that with --
- 13 usually it's our pharmacy manager, unless the
- 14 pharmacy manager is the one suspected of the
- 15 theft, and then we would do the monitoring, the
- video, and eventually sit down and talk to the
- 17 person.
- 18 Q. Okay.
- MR. GADDY: Can you pull
- 20 P-WAG-Y2366.
- 21 BY MR. GADDY:
- 22 Q. How long has -- have you received
- 23 exception reports at Walgreens?
- A. They've been available since I've

```
been with the company.
 1
 2
 3
          (Walgreens-Zaccaro Exhibit 2 marked.)
 4
 5
             Q.
                   Okay. Let me show you what I'm
 6
    marking as Exhibit 2. Do you recognize --
 7
    obviously it's an e-mail, but then there's, it
 8
     looks like, a chart copied and pasted below
 9
     that.
10
                   Do you recognize that, the chart
11
    specifically?
12
            A.
                  Yes.
13
                   Is this an exception report?
             Q.
14
             Α.
                   Yes.
15
                   Okay. Do you mind just kind of
             O.
16
    walking me through, because I saw some of these
17
    and I'll admit I don't completely understand
18
     them. So I'm hoping you can kind of explain to
19
    me what I'm -- what we're looking at here.
20
             Α.
                   So what this captures is the
21
     13-week history, the chart we're talking about,
22
    correct.
23
             0.
                  Okay.
24
                   And it captures when there is high
             Α.
```

- 1 risk activity of the drug --
- 2 Q. Okay.
- 3 A. -- that would require additional
- 4 review. This was referred to as your LPxRx
- 5 report.
- 6 O. What does that mean?
- 7 A. Loss prevention pharmacy report.
- Q. Okay.
- 9 A. In this 13-week for each drug,
- 10 sometimes -- and it's not uncommon -- we'll just
- 11 take the first drug, the 5/500 hydrocodone where
- 12 you see an adjustment of 488 were done.
- Q. What does -- can you tell me what
- "adjustment" means?
- 15 A. They changed that on hands. The
- 16 change of the on hands could happen one of two
- 17 ways. Either a technician goes to fill the drug
- 18 and it's not there and they make the adjustment,
- or we fill more than what our system says we
- 20 had, then the system will make an automatic
- 21 adjustment.
- That's the posting thing I
- 23 mentioned earlier. If they don't post it, our
- 24 system doesn't know we have it, and then they

- 1 fill something that our system doesn't believe
- 2 is there. And so the system will make the
- 3 adjustment.
- 4 We have two separate systems for
- 5 inventory and then for the pharmacy fill. So if
- 6 they're not done right and each system isn't
- 7 done correctly --
- Q. That's where you get some of those
- 9 accounting type errors?
- 10 A. Yes.
- 11 Q. Okay.
- 12 A. And so -- but typically in these
- 13 situations, this captures -- what we would be
- 14 looking for is what we received -- this is what
- would flag me in what I do, in my role for theft
- 16 and loss -- is what we receive, we would expect
- 17 that our total purchases come pretty close to
- 18 what our sales are. So then that way we have
- 19 the sales of -- we have in stock what we filled.
- If you start seeing a whole bunch
- 21 more and we're not getting fills, it's "Why do
- 22 we -- why are we receiving all of this? Is
- 23 somebody going into the ordering system and
- increasing orders so those won't be captured?"

- 1 Could be, maybe not. I'm not sure. That's what
- 2 we find out when we go in for the interview.
- But when you have an adjustment,
- 4 sometimes you can go in and do an on-hand count
- 5 and let's just say somebody maybe posted that
- 6 receipt finally, you go and you do an on-hands
- 7 count and you adjust it right back up.
- 8 During this time, this report
- 9 captured all kinds of things, and it was
- 10 oftentimes a page, two pages long. We have
- 11 since changed our filtering at the support
- office is what they did, and it now captures
- only the -- it's truly unaccounted for. We need
- 14 to figure out where it's at. So ...
- Q. Okay. Let me see if I can ask you
- 16 a couple of specific questions to make sure that
- 17 I can understand this.
- 18 A. Okay.
- 19 Q. So first off, this is a report --
- 20 it looks like the date of the e-mail is
- 21 April 2010?
- 22 A. I see that, yes.
- Q. Okay. Would this have been the
- 24 format that you received exception reports in

```
from going all the way back to '06?
 1
 2
             Α.
                   Yes.
                   Until about when?
 3
             0.
 4
             Α.
                   Our new HR XD was -- and I'm
 5
     roughly estimating --
 6
             Ο.
                   Sure.
 7
                   -- four, five years ago, maybe.
             Α.
 8
                  Okay. So '13, '14 time frame?
             Q.
 9
             Α.
                   Yes.
10
                   Okay. And so if I look at the
             Q.
11
    chart, it looks like the far left-hand column,
12
    which is, looks like, Control WIC, that's the --
    that's a code that correlates to the particular
13
14
    drug?
15
             Α.
                   Yes.
                   Okay. And the next column is an
16
17
    actual description of the drug?
18
             Α.
                   Correct.
19
                   Okay. And, again, if we're just
             0.
20
    using the top line as an example of the
21
    description, this particular drug, it's
22
    hydrocodone?
23
            Α.
                  Correct.
24
                   Okay. And the next column says On
```

Q.

- 1 Hand.
- 2 A. Yes.
- Q. Does that mean how much is
- 4 supposed to be sitting on the shelf at the
- 5 pharmacy?
- 6 A. That's when the report is
- 7 generated. What it is capturing, what our
- 8 systems are saying is on hand.
- 9 Q. So that's what the computer is
- 10 telling you is sitting on the shelves at the
- 11 pharmacy?
- 12 A. Yes. But this is also -- you
- 13 should know, is not a live update. This report
- 14 would have only updated -- should have been once
- a week but sometimes systems go down. They are
- 16 computers, so ...
- 17 Q. Okay. What's the warehouse column
- 18 telling us?
- 19 A. How many was received from our
- 20 warehouse, our distribution center.
- 0. And are these -- these numbers
- that we're looking at, is that number of pills?
- 23 A. Yes.
- Q. Okay. So that's number of pills

- 1 or number of dosage units; is that fair?
- 2 A. Yes.
- Q. Okay. So for this particular
- 4 store -- and, again, I think you said this was a
- 5 13-week average or a 13-week report?
- 6 A. Thirteen-week, yes.
- 7 Q. So for this 13-week period, this
- 8 particular store had ordered 20,500 of these
- 9 hydrocodone pills?
- 10 A. That's what the report says, yes.
- 11 Q. Okay. What's Vendor?
- 12 A. That is where they would order if
- 13 we didn't have it in stock.
- Q. So is that where they would have
- 15 to get pills from Cardinal Health or something
- 16 like that?
- 17 A. Yes.
- 18 Q. So your system would tell you how
- many pills came in from the Walgreens
- 20 distribution center, as well as how many came in
- 21 from any outside vendors?
- 22 A. Yes.
- Q. Okay. And the next column says
- 24 Total Purchase. So is that -- is that adding up

- 1 the Warehouse and the Vendor?
- 2 A. Yes.
- Q. Okay. What is Claims?
- 4 A. Claims could be if it was -- if
- 5 products expired, we have a process to claim
- 6 those. If it is maybe a wrong fill and a
- 7 customer brings it back because they got
- 8 something wrong or there was something -- we
- 9 can't refill that and sell that drug, so then it
- 10 goes into that process. We have to adjust that.
- 11 Q. Is that essentially when a
- 12 pharmacy has to return a product?
- 13 A. Yes.
- 14 Q. Okay. Okay. And then the
- 15 Adjustments?
- 16 A. Yes.
- 17 Q. So let's skip that one for just a
- 18 minute, and let me ask you about the other two.
- 19 A. Okay.
- Q. So Sales?
- 21 A. Yes.
- Q. Tell me what that means.
- A. The quantity of pills that were
- 24 prescribed and sold -- prescribed, filled, and

- 1 sold in that 13-week period.
- Q. Okay. So I guess, in theory,
- 3 should the amount on hand be the difference
- 4 between the total purchased and the sales?
- 5 A. You would expect that that would
- 6 balance. And then you have an overbuy of 424,
- 7 but you see the bottle count was a 500-count
- 8 bottle. So clearly they needed that bottle of
- 9 500 for the difference of the 424, so ...
- 10 Q. Okay. I'm sorry. You lost me.
- 11 A. Well, you have an overbuy of 424.
- 12 Q. Okay. What's "overbuy" mean?
- 13 A. We don't want them to have in
- 14 stock any more than they need. If you have --
- 15 we've had instances in the past -- I personally
- 16 have never had a case, but I'm just -- I know
- 17 that some cases and investigations in -- that
- 18 come about we're aware that the technicians at
- 19 one time were able to -- and this was before I
- 20 was with the company -- were able to manually
- 21 adjust the order quantities.
- So if you have a technician who
- 23 connects the dots and has been there for a while
- 24 and did the inventory ordering, they could have

- 1 known, if they were stealing that drug, that
- 2 they couldn't run out for a prescription fill,
- 3 so they would increase those orders. But, of
- 4 course, if they're stealing, it wouldn't reflect
- 5 in the sales.
- This is the whole analyst stuff
- 7 that we look at for justifying why we have so
- 8 many. So when we're assessing that, what I will
- 9 always look at is, like, "Yeah, 424 is a lot,
- 10 why do we have that many extra, " considering how
- 11 many orders they get in one week and stuff.
- But if you look at the
- description, that 500 on the very end of that
- drug means it's a 500-count bottle.
- 15 Q. Okay.
- 16 A. So we would have needed that 424
- 17 overage because we opened that bottle to be able
- 18 to do fills.
- 19 Q. Gotcha. Okay. So what I hear you
- 20 to be saying is that Walgreens has a goal of not
- 21 having a lot of extra pills on the shelf?
- 22 A. I don't know what their goal is.
- 23 In my line of work and what I look at as far as
- theft and losses, it can be an indicator of

- 1 there could be a problem.
- Q. Okay. So if there's a lot of
- 3 pills on hand, that's a flag to you of something
- 4 that you need to look into?
- 5 A. For what I look into, yes.
- 6 Q. Okay. And what -- it looks like,
- 7 if you look at the bottom of this e-mail, you
- 8 write to Brian, and Brian would be the -- he'd
- 9 be the head pharmacist at this particular store?
- 10 A. Going back -- I mean --
- 11 Q. Would he be a pharmacist?
- 12 A. I sent it to the store manager
- 13 e-mail address --
- Q. Mm-hmm.
- 15 A. -- and I can't remember who was
- 16 the store manager or the pharmacy manager there
- 17 at that time.
- 18 Q. Okay. Okay. So there's a
- 19 difference between the store manager and
- 20 pharmacy manager?
- 21 A. Yes.
- Q. Okay. So you say, "Hi Brian, I
- was reviewing your LPxRx report and there
- 24 would -- and would like to have the on hands of

- 1 the hydrocodone APAP 5/500 verified."
- What -- is it fair to say that
- 3 what popped out to you when you looked at this
- 4 particular exception report was the 2,122 pills
- 5 that were supposedly on hand?
- 6 A. No. What would have stuck out to
- 7 me was the adjustment of 488.
- 8 Q. Okay. So we never -- I never got
- 9 back to that column.
- 10 A. Yes.
- 11 Q. Can you explain to me what that
- means.
- 13 A. That would have been positive or
- 14 negative adjustments that were done with the on
- 15 hands of that drug.
- 16 Q. Is that somebody at the pharmacy
- 17 who was manually making that change into the
- 18 system?
- 19 A. It could be, but it could also be
- 20 the system making the change. As I said before,
- 21 if you have something -- if you -- if we don't
- 22 post a receiving order and our system doesn't
- 23 know we have that order, but then we fill it,
- the system says, "How did you fill what you

- 1 don't have?"
- 2 So the system will make that
- 3 adjustment.
- 4 Q. Okay. In that situation that you
- 5 just described where you fill a prescription
- 6 where whoever had -- did not properly intake it
- 7 and post it, you would see a positive adjustment
- 8 there, right?
- 9 A. No. It would be a negative
- 10 because the system corrects what it thinks it
- 11 should be.
- 12 Q. Okay.
- 13 A. So we're out 488. It doesn't post
- 14 positive -- the only time it will adjust
- 15 positive is if, one, when you post the receipt
- or, two, if you do an on-hands review and count
- it and verify it and realize that you actually
- 18 have more. And then you make the positive
- 19 adjustment.
- 20 Q. So when you see this negative
- 21 adjustment of 488, what does that tell you?
- 22 A. It needs to be -- the inventory on
- 23 hands would need to be verified to make sure
- 24 it's correct. And if it's not offset, then I

- 1 would ask them to continue to count on an
- 2 average of two to four times per week to assess
- 3 if it's a theft concern.
- Q. Okay. So when you see this, your
- 5 concern is that 488 pills may have gone missing?
- 6 A. Correct.
- 7 Q. Okay. So just so I can kind of
- 8 close out the loop on this, walk me through the
- 9 extent of your investigation as far as what you
- 10 would do after seeing an exception report such
- 11 as this.
- 12 A. If the drugs can't be accounted
- for and we don't know where they're at and we
- 14 count again and realize we have more missing,
- 15 then I reach out to the Board of Pharmacy and we
- 16 begin working together and collaborating
- 17 together on cameras, counts.
- 18 Q. Okay. And when you're having
- 19 adjustments like this in these investigations,
- 20 what type of theft -- what type of thefts are
- 21 possible?
- A. Anything.
- Q. Okay. This could be anything from
- 24 somebody jumping over a counter and taking a

- 1 bottle to a pharmacist or a pharmacy tech --
- 2 A. Stealing.
- Q. Okay. During your time at
- 4 Walgreens, have you had situations where you've
- 5 had customers steal prescription pills?
- 6 A. Customers?
- 7 Q. Or outside -- out --
- 8 non-employees.
- 9 A. Non-employees? In the form of
- 10 burglary and robberies, yes.
- 11 Q. Okay. During your time at
- 12 Walgreens, have you had situations where you've
- 13 had employees involved in thefts of controlled
- 14 substances?
- 15 A. Employees as in technicians,
- 16 pharmacists?
- 17 Q. Correct.
- 18 A. Both, yes.
- 19 Q. Okay. And has that happened over
- the course of your career going back to 2006?
- 21 A. Yes.
- Q. Okay. And as you sit here today,
- do you recall approximately how many times
- 24 you've been involved in investigations with the

- 1 Board of Pharmacy regarding thefts of controlled
- 2 substances from Walgreens' stores where
- 3 pharmacists or pharmacy technicians were the
- 4 targets of those investigations?
- 5 A. I would roughly estimate five to
- 6 six investigations in the pharmacy for theft of
- 7 drugs a year.
- 8 Q. Okay. Have you been involved in
- 9 any that resulted in arrests?
- 10 A. Yes.
- 11 Q. Okay. Approximately how many?
- 12 A. All of ours result in arrests.
- 13 And to be clear, it is the Board of Pharmacy
- 14 investigators who file those charges.
- 0. Okay. So I think we determined
- 16 earlier that from 2006 until approximately 2013
- or 2014, your area encompassed what I think you
- 18 called Cleveland West?
- 19 A. Correct.
- 0. Okay. And that was about -- was
- 21 it about 15 stores in Cleveland?
- 22 A. That was about 27 stores.
- Q. Sorry. About 27 stores.
- 24 And based on what you just told

- 1 me, would it be fair to say that from 2006
- 2 through approximately 2013, 2014 that you were
- 3 involved in five to six investigations a year
- 4 during that time frame that resulted in the
- 5 arrests of a Walgreens' technician or a
- 6 Walgreens' pharmacist for theft of controlled
- 7 substances?
- A. Yes. And when I say "on average,"
- 9 one year might only have --
- 10 Q. Sure.
- 11 A. -- three investigations. The next
- 12 year, which is very uncommon, but I had, I
- 13 think, three investigations in one month another
- 14 year. So when I say "on average," if you
- 15 average it out from year over year like that.
- 16 About five to six, yes.
- 17 Q. Okay. Since 2013, 2014, the
- 18 number of stores you supervise has increased?
- 19 A. Yes.
- Q. By about three or four times?
- 21 A. Yes.
- Q. Okay. You have about 75 stores
- 23 now?
- 24 A. In between 60 and 65.

- 1 Q. Okay. Are you seeing more
- 2 investigations because you have more stores?
- 3 A. No.
- 4 Q. Still about five to six a year?
- 5 A. Yes.
- 6 O. Are you still reviewing exception
- 7 reports on a regular basis?
- A. I do review them, but it is the
- 9 expectation of our pharmacy managers to review
- 10 those.
- 11 Q. Okay. Who has the primary
- 12 responsibility for reviewing the exception
- 13 reports?
- 14 A. The pharmacy manager and store
- manager.
- 16 Q. Okay. And if the pharmacy manager
- 17 sees something like what you flagged here at
- 18 this particular store with the negative
- 19 adjustment of 488 on the controlled substance
- 20 hydrocodone, what is the pharmacy manager
- 21 supposed to do?
- 22 A. It varies. It depends on the
- 23 person. Some pharmacy managers will reach out
- 24 and say, "Hey, just so you know, if you see

- 1 this, this is what it was. This is what I was
- 2 able to determine."
- 3 Some pharmacy managers, unless it
- 4 is a loss, a confirmed, like, "I don't know
- 5 where it's at," then they'll call me. But if
- 6 they can account for it, I may not hear anything
- 7 from -- it just -- it depends on that pharmacy
- 8 manager and how they do their job.
- 9 Q. When you get involved into these
- 10 investigations, like you -- you know, you ask
- 11 for -- it looks like you ask the store
- 12 manager -- either the pharmacy manager or the
- 13 store manager to look into this, correct?
- 14 A. Yes.
- Q. And I guess there's the
- 16 possibility they can write you back with an
- 17 explanation that would put it to rest; is that
- 18 fair?
- 19 A. Yes.
- 0. Okay. And there's other times
- 21 where maybe the explanation isn't fully
- 22 sufficient or they're not able to give you a
- 23 good answer; is that fair?
- 24 A. Yes.

- 1 Q. In those situations -- I think
- 2 I've heard you mention an interview. Do you
- 3 take charge -- are you still in charge at this
- 4 point and are you doing follow-up or is it
- 5 turned over to the Board of Pharmacy?
- A. So once a loss, a true loss, is
- 7 confirmed, I immediately notify our Board of
- 8 Pharmacy, an investigator. We then will plan
- 9 how to go forward. I will communicate next
- 10 steps and directives to the pharmacy manager on
- 11 how to go forward, which typically is counting
- the drugs every day and doing it manually so we
- 13 know and confirm the loss. And then --
- I lost my train of thought, the
- 15 question that you were trying to get to. What
- 16 was your question again?
- 17 Q. Sure. So -- I think you answered
- 18 it, but what I was asking about was where -- how
- 19 long you stay involved. And what I heard you
- just say is, as soon as you confirm a theft,
- it's turned over to the Board of Pharmacy?
- 22 A. No. I stay involved until the
- 23 end.
- 24 Q. Okay.

- 1 A. And I will do the interview with
- 2 the board investigator. The board investigator
- 3 will always lead the interviews, and if I need
- 4 to interject or ask questions, I will -- I'm
- 5 always given the opportunity at the end or I
- 6 will interject during the course of that
- 7 interview.
- Q. Okay. Other than using these
- 9 exception reports for the purpose that we just
- 10 went over to identify loss or potential theft,
- is there any other reason for which you utilize
- 12 the exception reports?
- 13 A. Compliance, making sure that --
- Q. What do you mean by "compliance"?
- 15 Compliance with what?
- 16 A. Making sure that they're following
- 17 the right processes, posting or something like
- 18 that. Like if I'm identifying large overbuys.
- 19 I'll start looking into some of their receiving
- and posting and then I'll challenge them on if
- 21 I'm noticing unposted receipts or receipts that
- 22 were posted weeks after the product was arrived.
- 23 So ...
- Q. Okay. So that would be compliance

- 1 with internal Walgreens' policies and
- procedures; is that fair?
- 3 A. That, yes.
- 4 Q. Okay.
- 5 A. Primarily these are used for
- 6 theft, identifying theft, for me, the way I look
- 7 at these.
- Q. Okay.
- 9 A. The way I analyze these reports
- 10 and my purpose for them.
- 0. Outside of utilizing them for
- theft and compliance with Walgreens' ordering
- 13 policies and procedures, are there any other
- 14 reasons for which you use the exception reports?
- 15 A. No, not that I can think of,
- 16 anything I can think of at this time.
- 17 Q. Are there any other reports that
- 18 you receive in the course of your work as a loss
- 19 prevention person with Walgreens that contains
- information about the pharmacy, period, whether
- 21 it's dispensing histories or ordering histories
- 22 or anything like that, or is it just the
- 23 exception report?
- A. So there's tabs for all of that.

- Q. What do you mean by "tabs"?
- 2 A. On our exception base reporting
- dashboard. There's tabs for sales. There's
- 4 tabs for inventory. There's tabs for
- 5 performance and training. I don't usually go
- 6 into them.
- 7 Q. Okay.
- 8 A. Very rarely.
- 9 Q. Are there any other -- any other
- 10 reports outside of the exception dashboard that
- 11 you receive related to the pharmacy?
- 12 A. Our -- that are not generated --
- these are generated regularly. The other
- 14 reports that I may access is into our SIMS
- 15 system, which is our inventory management
- 16 system, but that is just going in and verifying
- 17 that myself. Once I see something like this,
- then I will start reviewing more of the actual
- 19 inventory reports.
- 20 O. Okay.
- 21 A. So I don't know if those would
- 22 necessarily be considered exception reports.
- 23 It's more inventory reporting.
- Q. Okay. Are there any reports that

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1 you review for the purpose of determining
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- 2 whether or not a particular store is dispensing
- 3 an excessive volume of controlled substances?
- 4 A. I'm not -- that's not my area with
- 5 the dispensing. I don't monitor any of that.
- 6 Q. Do you do any analysis of
- 7 dispensing of controlled substances whatsoever?
- 8 A. No. My area is on loss and theft.
- 9 Q. Okay. And has that been true for
- 10 the entire 12 years that you've been at
- 11 Walgreens?
- 12 A. Yes.
- 13 Q. Okay.
- 14 - -
- 15 (Walgreens-Zaccaro Exhibit 3 marked.)
- 16 - -
- 17 Q. Let me show you what I'll mark as
- 18 Exhibit 3. I'm going to look at what I think
- 19 are a couple more of these exception reports.
- 20 A. Okay.
- 21 Q. And do you recognize this document
- 22 as an e-mail chain between you and another store
- 23 manager?
- 24 A. Cecey was our pharmacy manager --

- 1 Q. Okay.
- 2 A. -- at the time.
- 3 Q. So Cecey was the pharmacy
- 4 manager --
- 5 A. Mm-hmm.
- 6 O. -- of this particular store?
- 7 A. Yes.
- Q. Okay. And if we start at the
- 9 bottom, very bottom of the first page, it looks
- 10 like this chain starts with an e-mail from you
- on July 31st of 2012, correct?
- 12 A. Yes.
- Q. Okay. And there's a couple people
- 14 who -- or I guess it looks like you e-mail to
- 15 the store manager who happened to be Cecey.
- 16 A. The RxM is a pharmacy manager
- 17 e-mail address --
- Q. Gotcha.
- 19 A. -- where MGR is the store manager
- 20 e-mail. So it looks like I sent it to the
- 21 pharmacy manager, and I copied our store manager
- 22 and Matt Soder, who would have been our pharmacy
- 23 supervisor for that district at the time.
- Q. Okay. Is Matt Soder your

- 1 supervisor or --
- 2 A. No.
- Q. You all are separate?
- 4 A. So in a district team at that
- 5 time, you had a loss prevention manager, a
- 6 pharmacy supervisor, a district manager, and a
- 7 district trainer. So it was a team of four of
- 8 us for one specific district.
- 9 Q. Okay. So the same 27 or so stores
- 10 that you served as the loss prevention manager
- 11 for at that time, Matt would have served as the
- 12 pharmacy supervisor?
- 13 A. Yes.
- Q. Okay. So it looks like you e-mail
- 15 Cecey, and you say, "Hi Cecey. Please review
- 16 and verify the on-hands of the hydrocodone as
- 17 noted below from the LPxRx. Almost two
- 18 500-count bottles? Please update me with your
- 19 findings."
- 20 Do you see that?
- 21 A. Yes.
- Q. Okay. And so, again, you're
- 23 asking about a -- hydrocodone, which is a
- 24 controlled substance, correct?

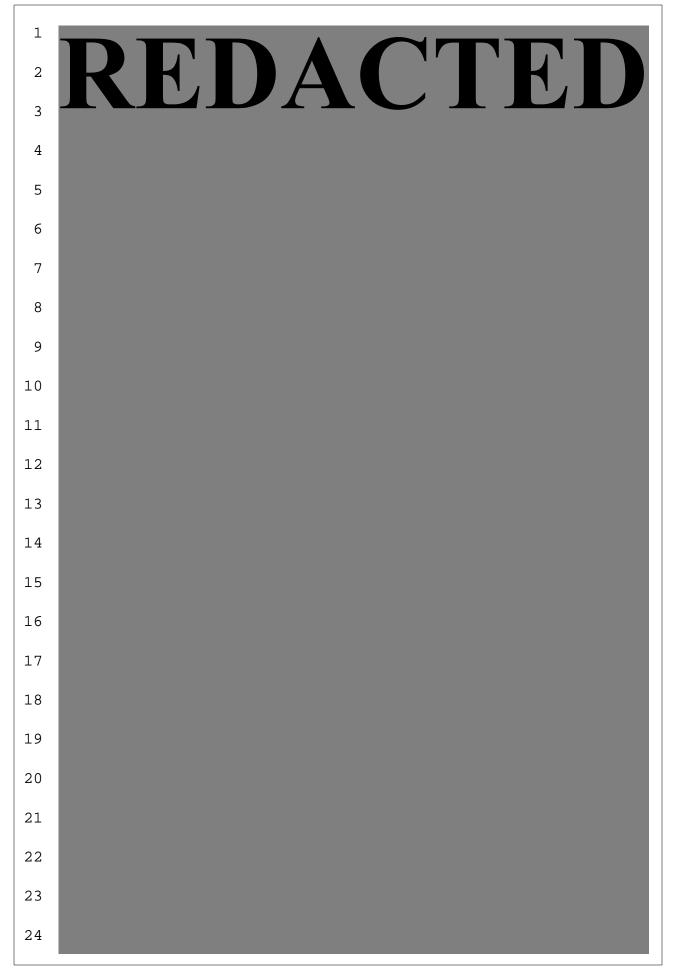
- 1 A. Yes.
- Q. Okay. And if we turn the page, is
- 3 this another one of these exception reports?
- 4 A. Yes.
- 5 Q. Okay. And it looks like -- if we
- 6 look at the top of the next page, it looks like
- 7 this was for Store 3310?
- 8 A. Yes.
- 9 Q. And that's a store in Cleveland,
- 10 Ohio?
- 11 A. Yes.
- 12 Q. Okay. And this report looks to be
- 13 a little bit different. It looks like maybe you
- 14 ran a report just for that particular drug, the
- 15 hydrocodone?
- 16 A. Yes.
- 17 Q. Okay. And some of the columns are
- 18 similar, but some of them are different. So if
- 19 you don't mind telling me -- tell me on this
- 20 chart what it is that jumped out at you that
- 21 made you reach out to Cecey?
- 22 A. The adjustment for negative 911.
- Q. Okay. Why is that of concern to
- 24 you?

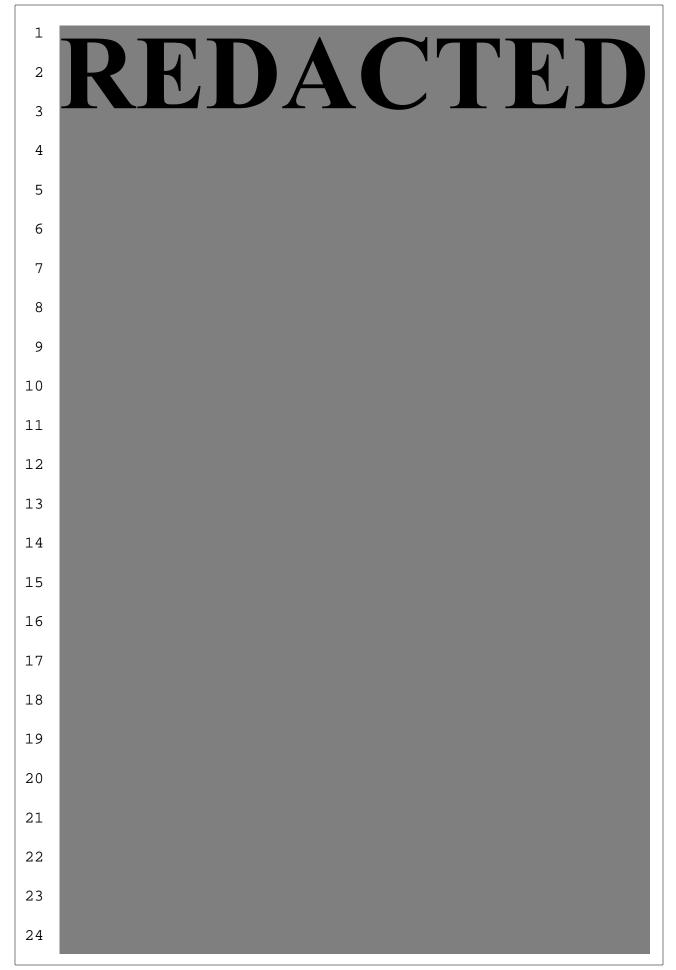
- 1 A. That would be almost two full
- 2 bottles of 500-count bottles.
- Q. Okay. And somewhere in the
- 4 system, the system is telling you that
- 5 potentially two 500-count bottle of hydrocodone
- 6 have gone missing?
- 7 A. Yes.
- 8 Q. Okay. And obviously that's
- 9 something you want to follow up on, right?
- 10 A. Yes.
- 11 Q. Okay. If we go back to the first
- 12 page, it looks like -- it looks like you
- 13 followed up with him after about a week or so
- 14 went by and you hadn't heard back from him?
- 15 A. Yes, which is why I -- with Cecey
- 16 she was not a pharmacy manager to follow up.
- 17 She wasn't very dependable to follow up on
- 18 things always when it comes up to things. It
- was a very high-volume pharmacy.
- So certain pharmacy managers, if
- 21 I -- having worked with them, know the history
- of their follow-through sometimes, I will CC the
- 23 store manager and the pharmacy supervisor to --
- Q. Okay. You would agree with me

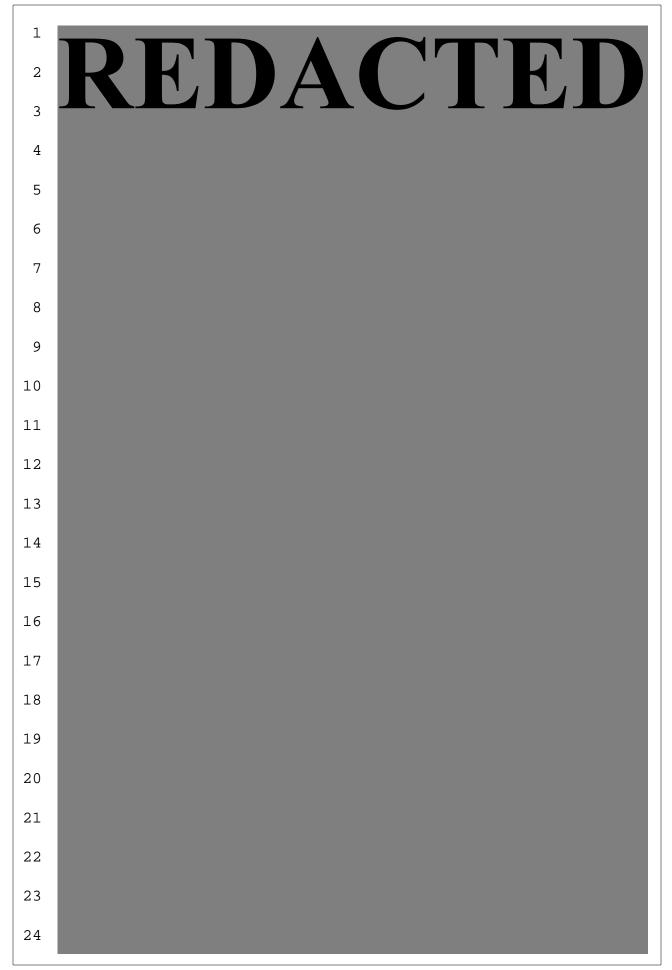
- 1 that it's a pretty serious concern if you
- 2 potentially have two 500-count bottles of
- 3 hydrocodone that have gone missing, right?
- 4 A. Yes.
- 5 Q. Okay. That's something that you
- 6 definitely would want to stay on top of and --
- 7 A. Yes.
- 9 A. Yes.
- 10 Q. Okay. So it looks like
- 11 approximately a week and a half later you follow
- up with her asking her to look into it again?
- 13 A. Yes.
- 14 Q. Okay. It then looks like you get
- a response from the store manager but not from
- 16 Cecey, correct?
- 17 A. That came from RxM, so that would
- 18 have been from Cecey. And if you see on the
- 19 bottom, it's her -- she has her name on the
- 20 bottom of the e-mail, too.
- Q. Gotcha. Thank you.
- 22 And so she writes, "I had them
- 23 count it overnight when it would be most
- 24 accurate and we are over by five. Was there an

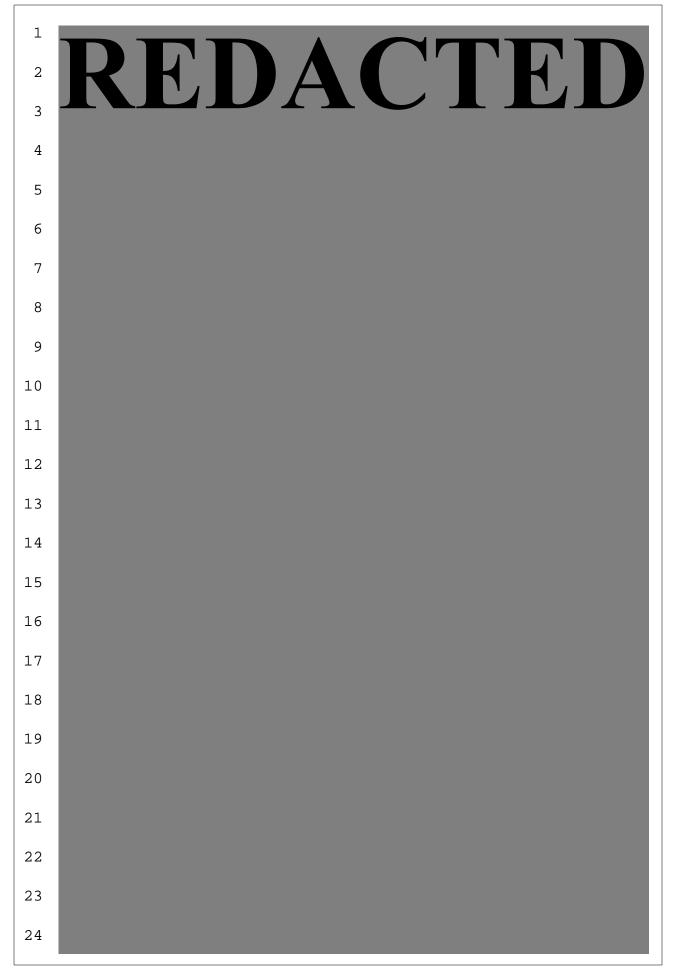
- 1 adjustment prior to 6-12 for a +? That was the
- 2 day after inventory."
- 3 Can you tell me what she's saying
- 4 there?
- 5 A. I don't recall the plus 5 by 5
- 6 tablets or five bottles and was there an
- 7 adjustment prior to 6/12 for a positive.
- 8 These -- the dates that you have on your time
- 9 stamp of that report are the week ending date.
- 10 So the week ending 7/24, we received 2,000 from
- 11 the warehouse, total purchases.
- 12 So it could have been in a
- 13 combination of three orders kind of thing. So
- 14 they get a 13-week view. I have the ability to
- do a 52-week review, which I -- it's not
- 16 uncommon for me to go in -- if we can't account
- for this 911 that are missing, I'll go back even
- 18 further to see, we may have had a positive
- 19 adjustment somewhere that would offset this,
- that somebody went in and positively adjusted
- 21 it.
- 22 Q. Okay. And when -- again, when
- 23 you're talking about two 500-count bottles of
- 24 hydrocodone, that's -- you're definitely going

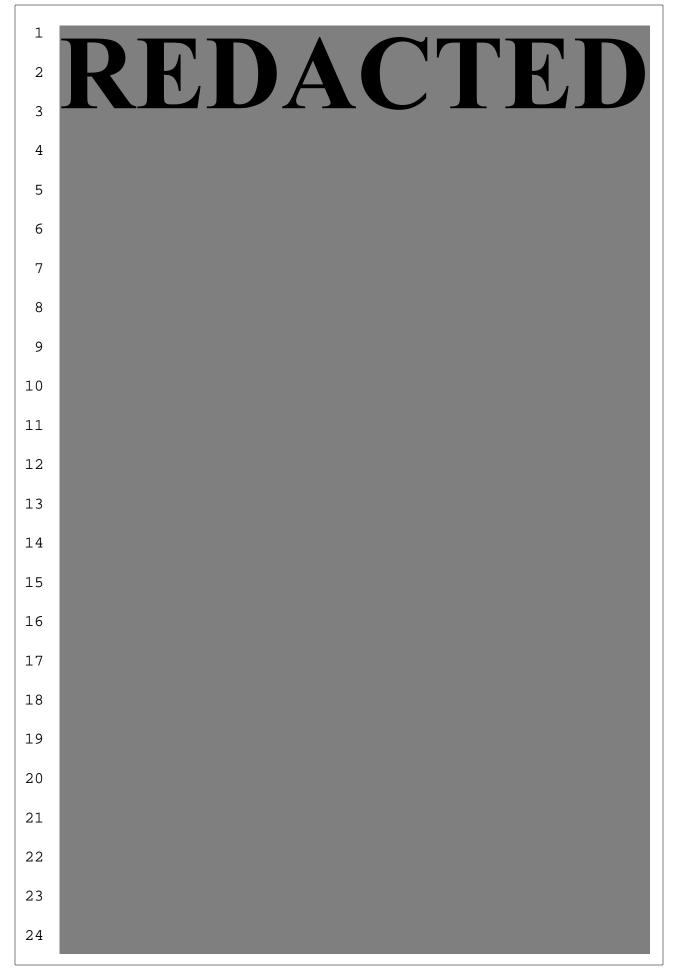
- 1 to do that follow-up investigation, right?
- 2 A. Yes.
- Q. Okay. Does her answer here, in
- 4 that e-mail we just read, does that solve the
- 5 problem for you?
- 6 A. No.
- 7 Q. Okay. So it looks like you
- 8 respond to her just above that and you tell her
- 9 you're concerned about the almost two 500-count
- 10 bottles that are unaccounted for, correct?
- 11 A. Yes.
- 12 Q. Okay. And it looks like she
- 13 writes back, "Yes, me and you both. Did you
- 14 look further back for adjustments?"
- Do you see that?
- 16 A. Yes.
- 17 Q. Do you recall whether or not this
- 18 situation ever got resolved?
- 19 A. I do not recall.
- Q. Okay. Is Cecey still a pharmacist
- 21 with Walgreens?
- 22 A. No.
- Q. Okay. When did she leave; do you
- 24 know?

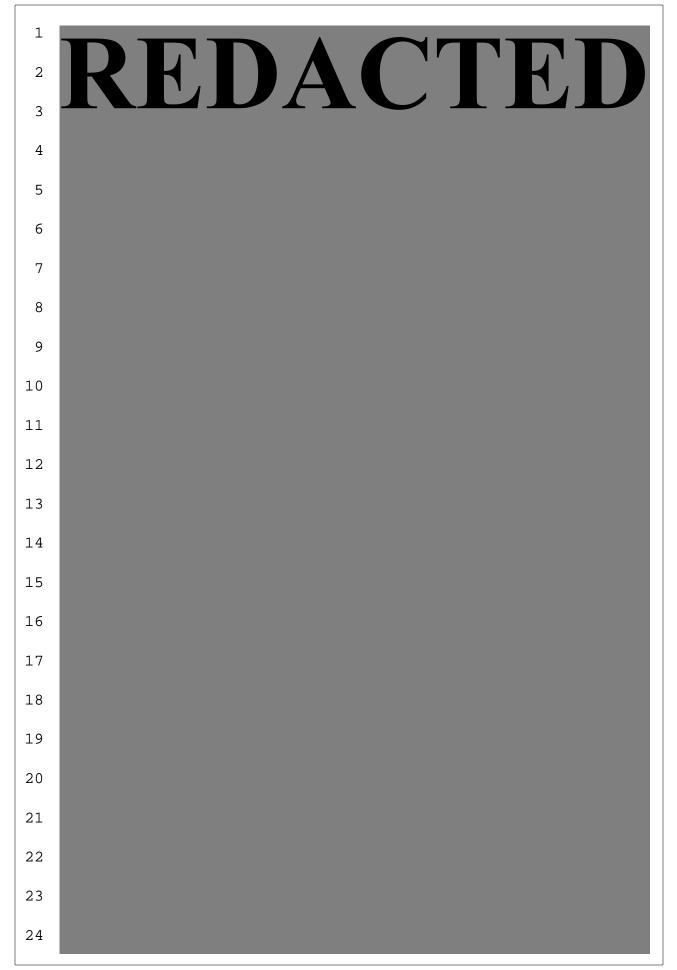


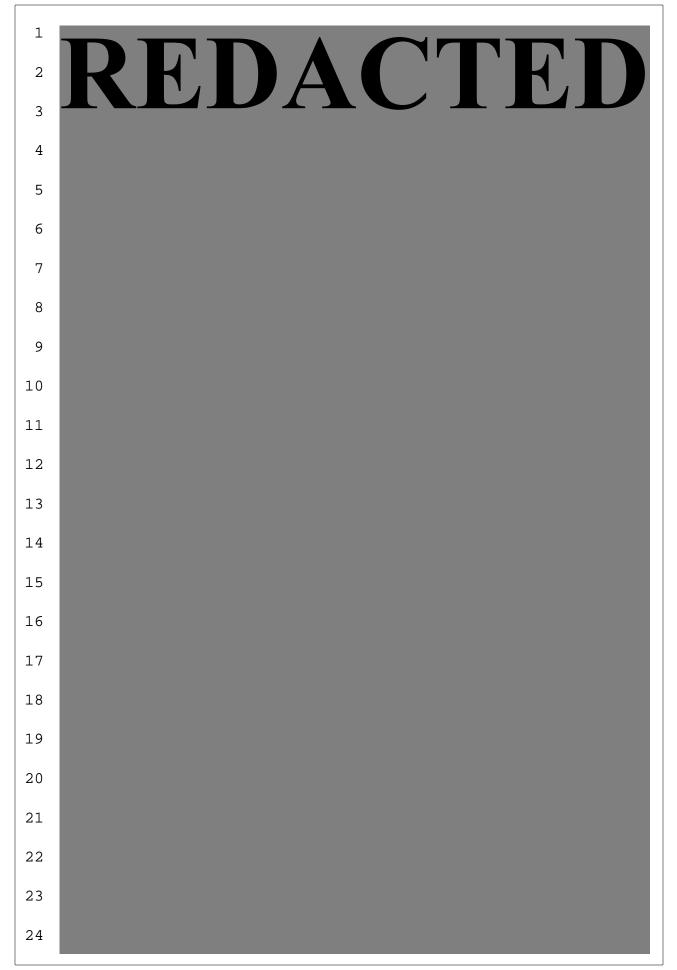


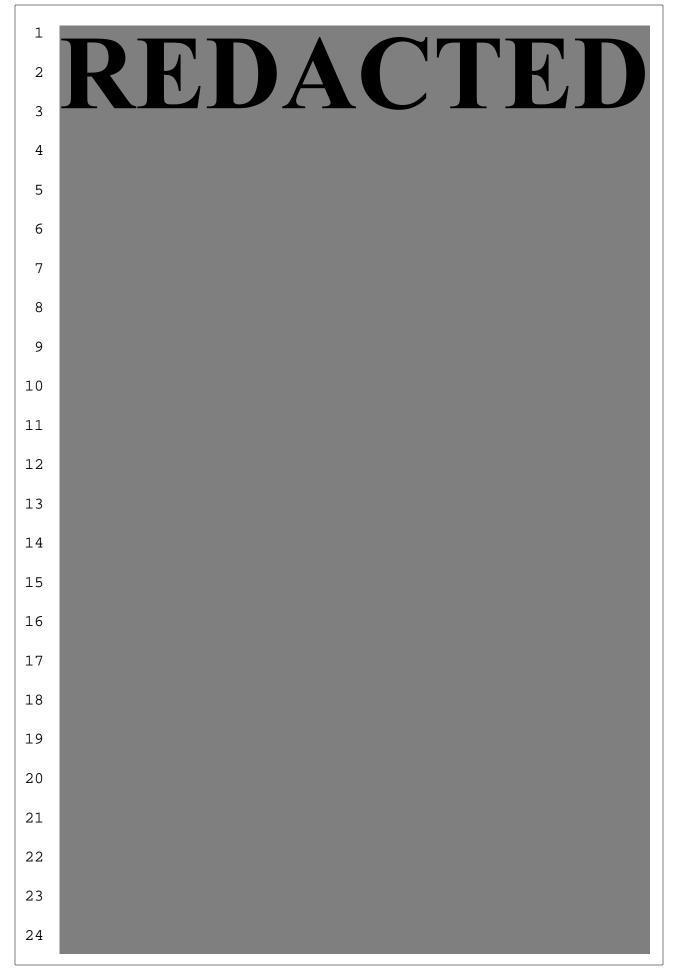


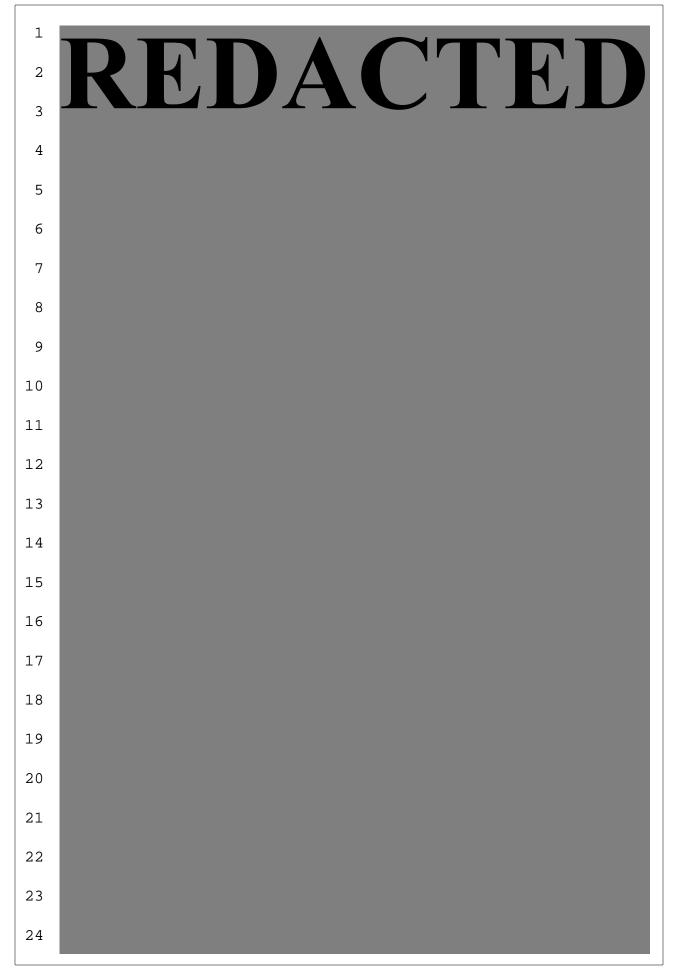


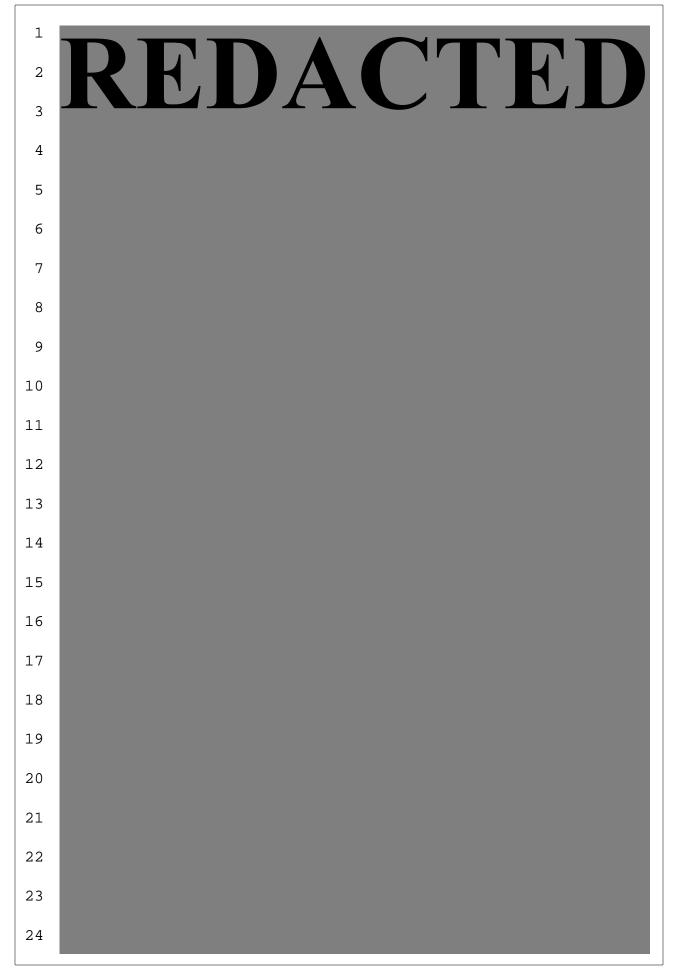


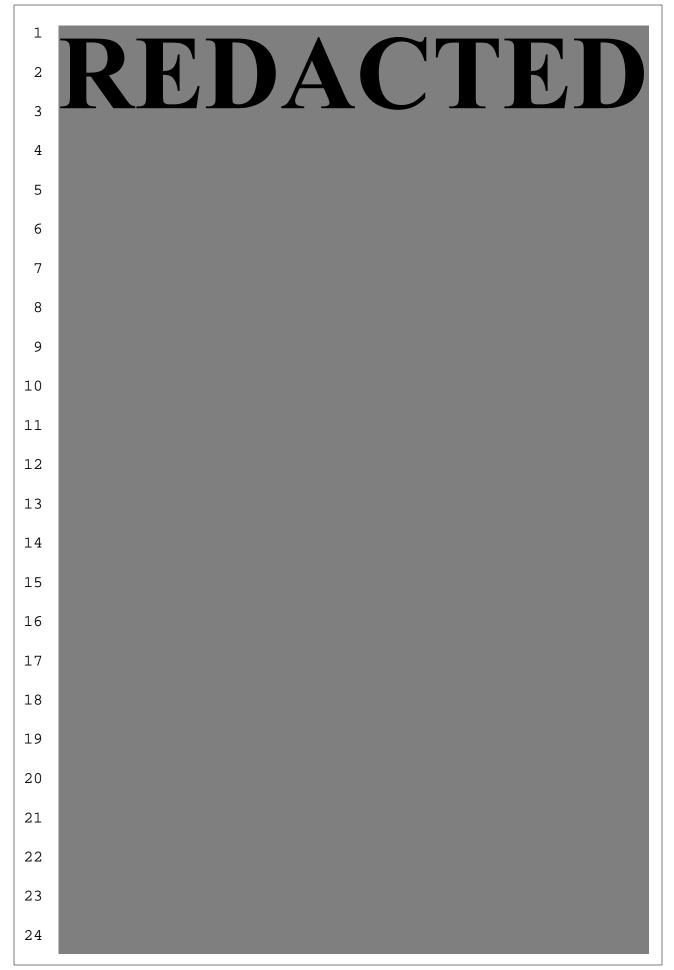


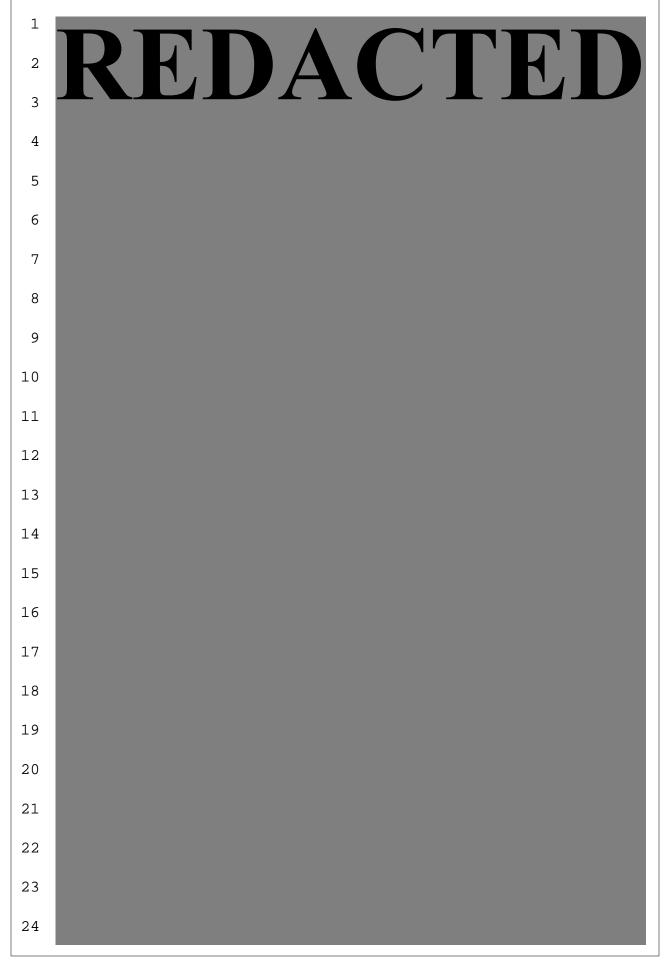


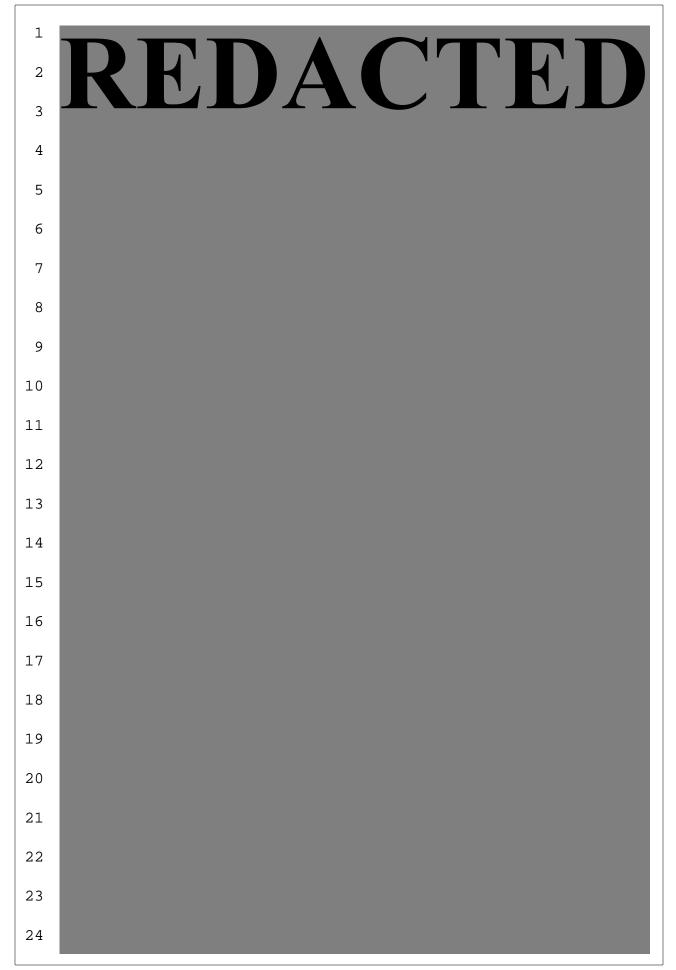


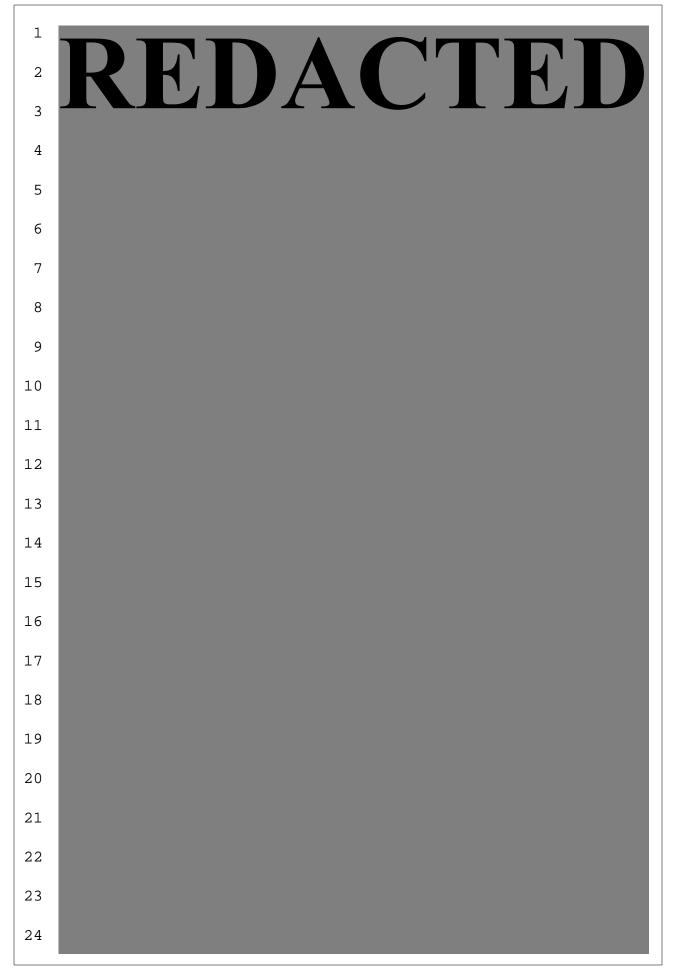


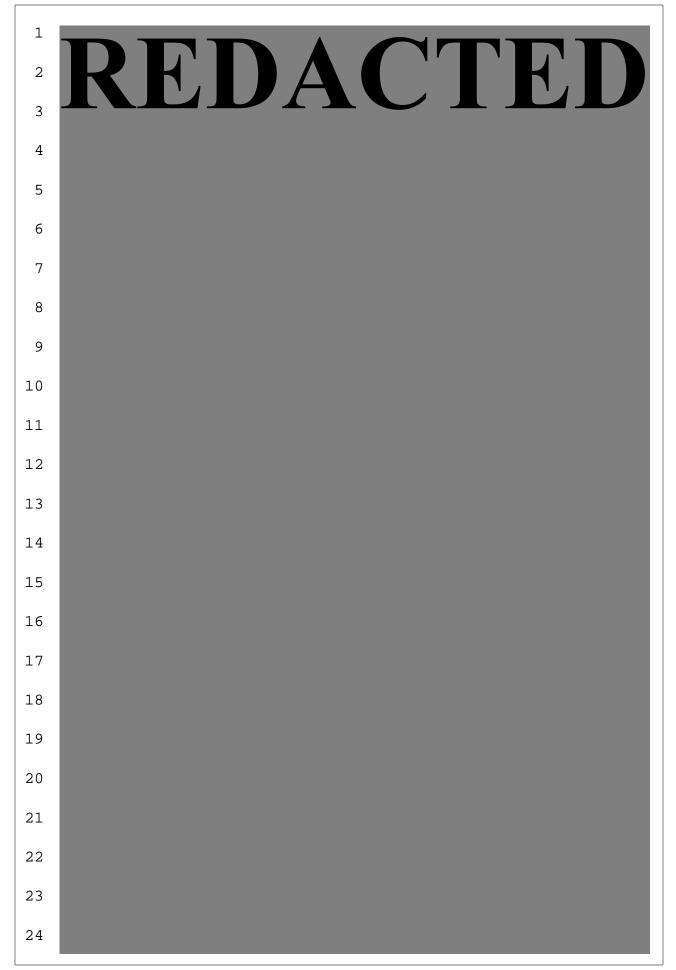


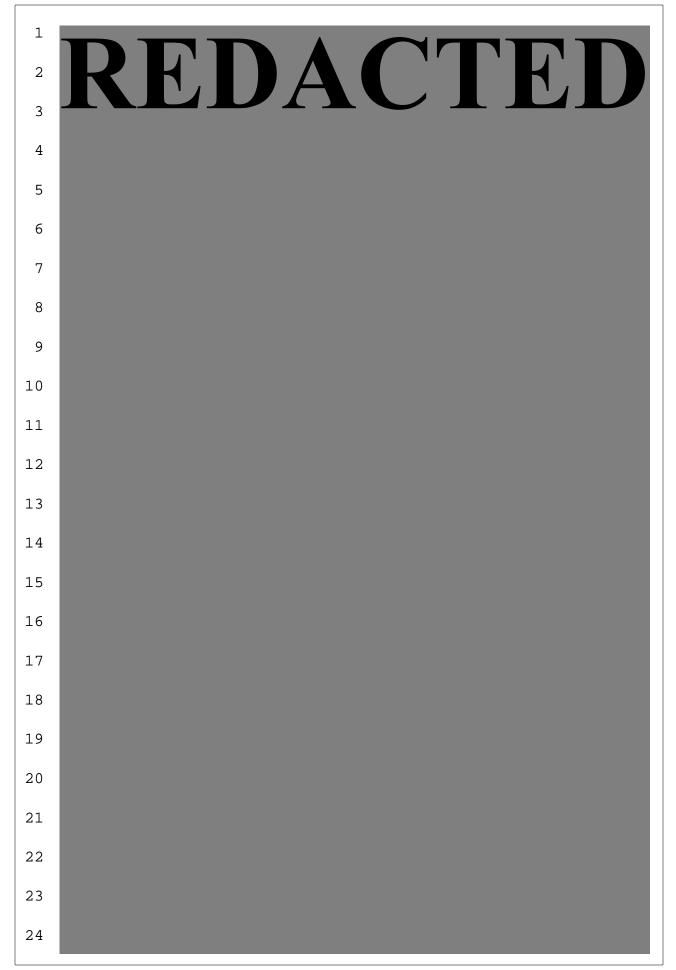


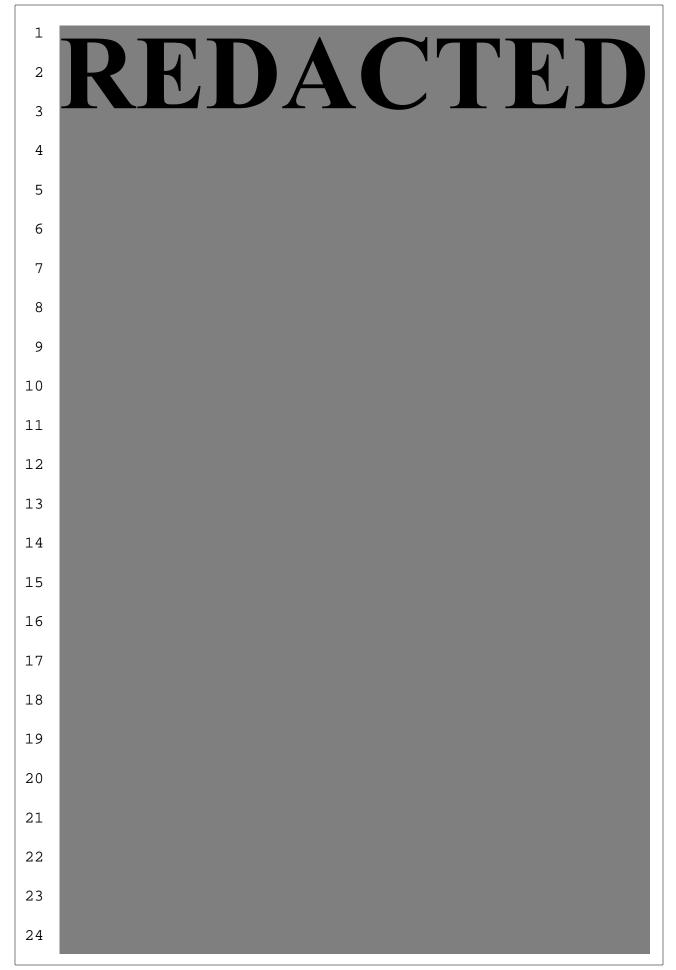


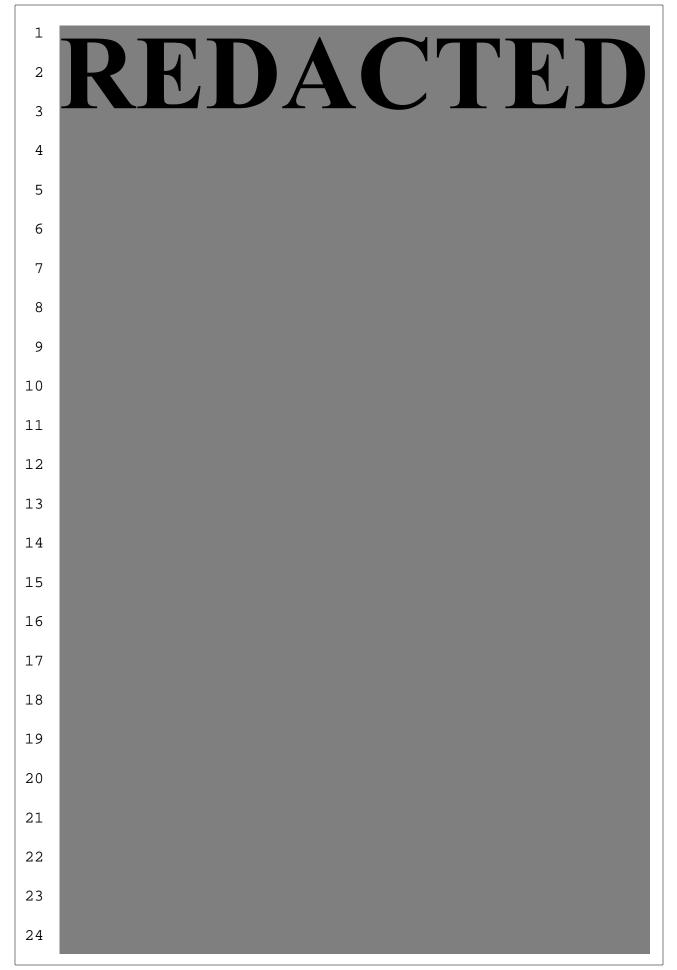


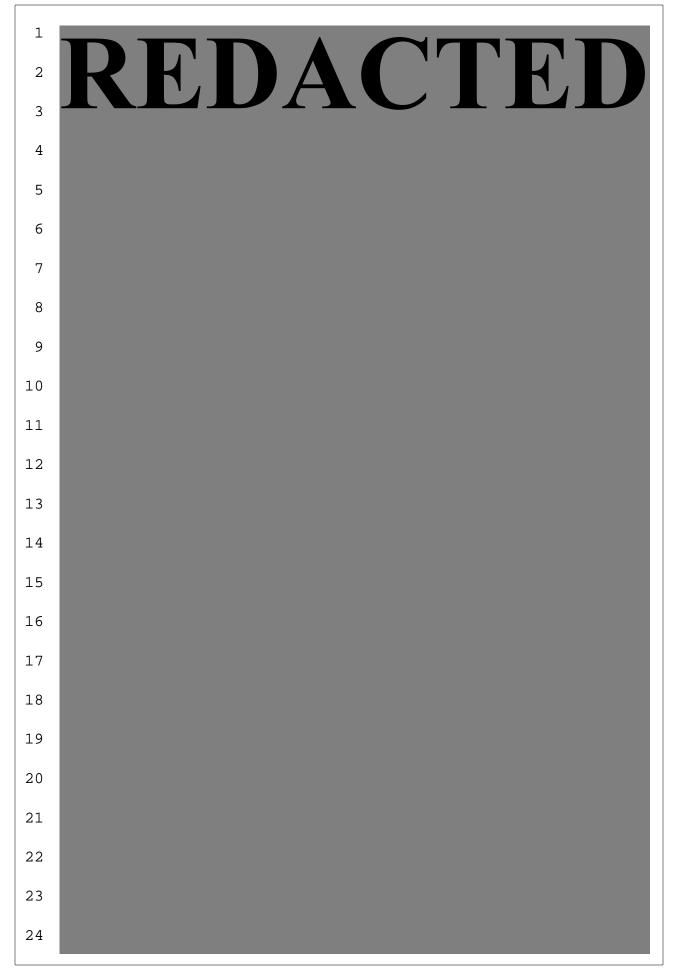


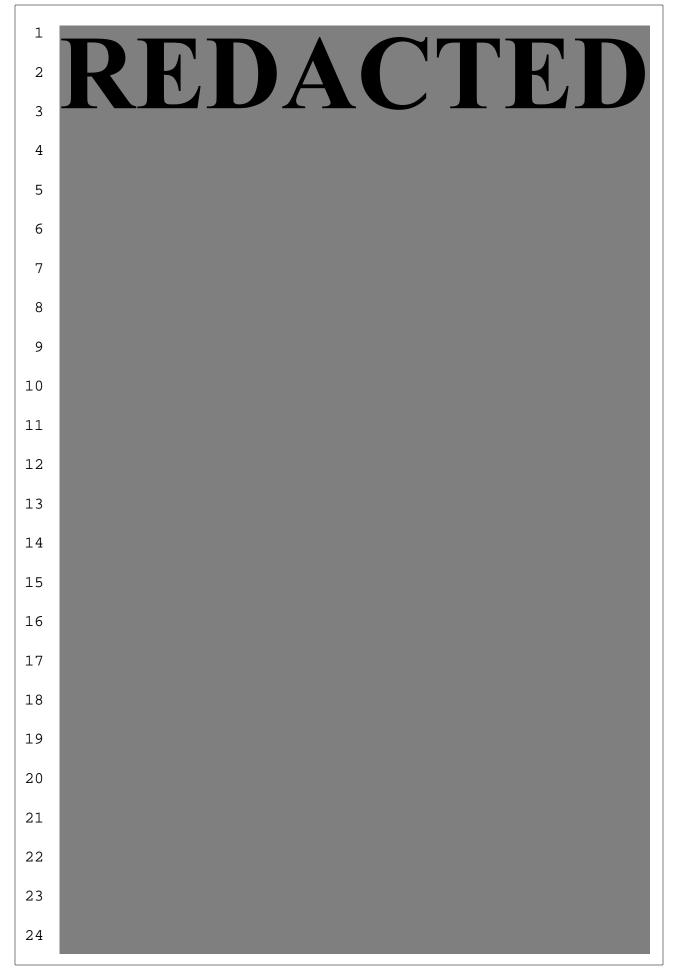


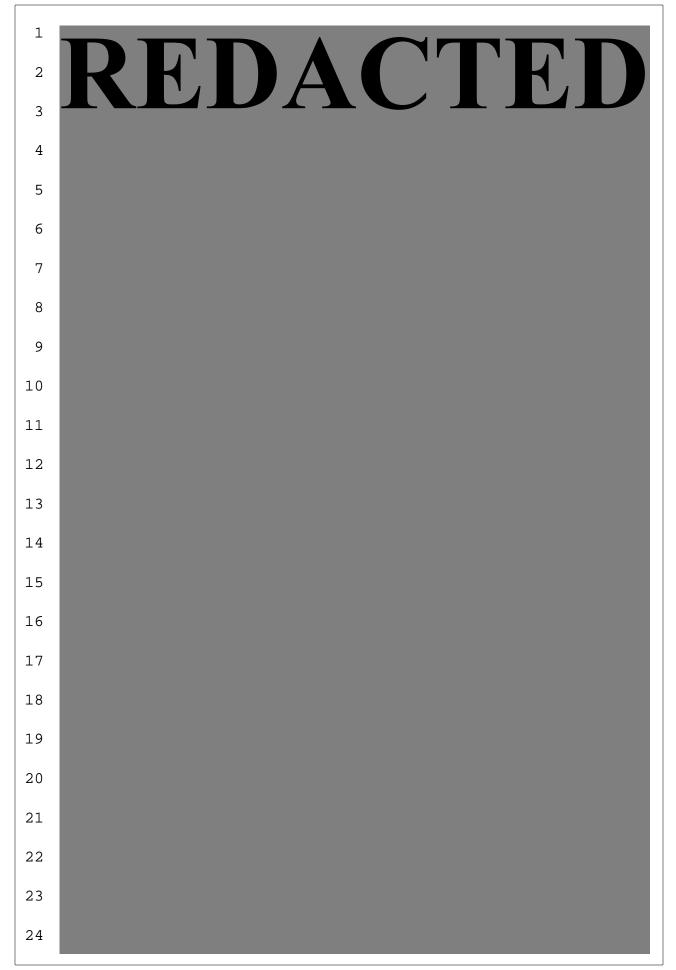


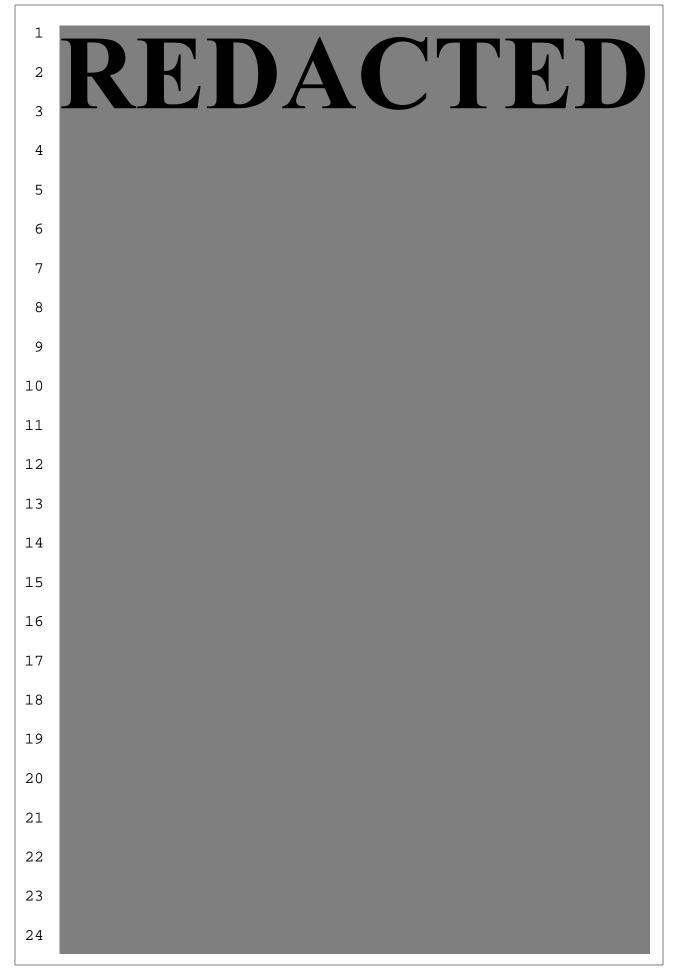


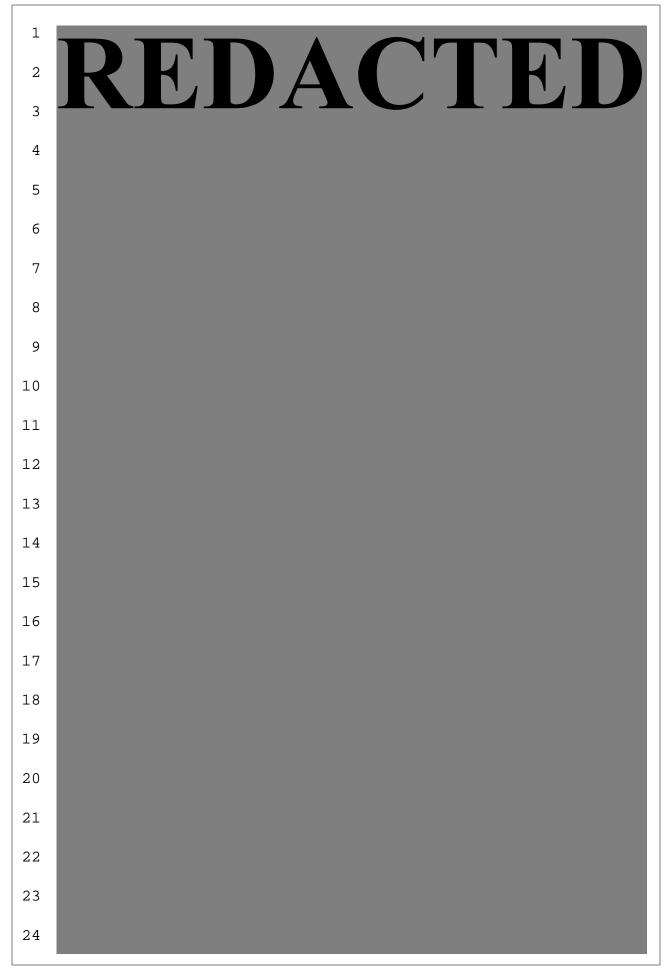


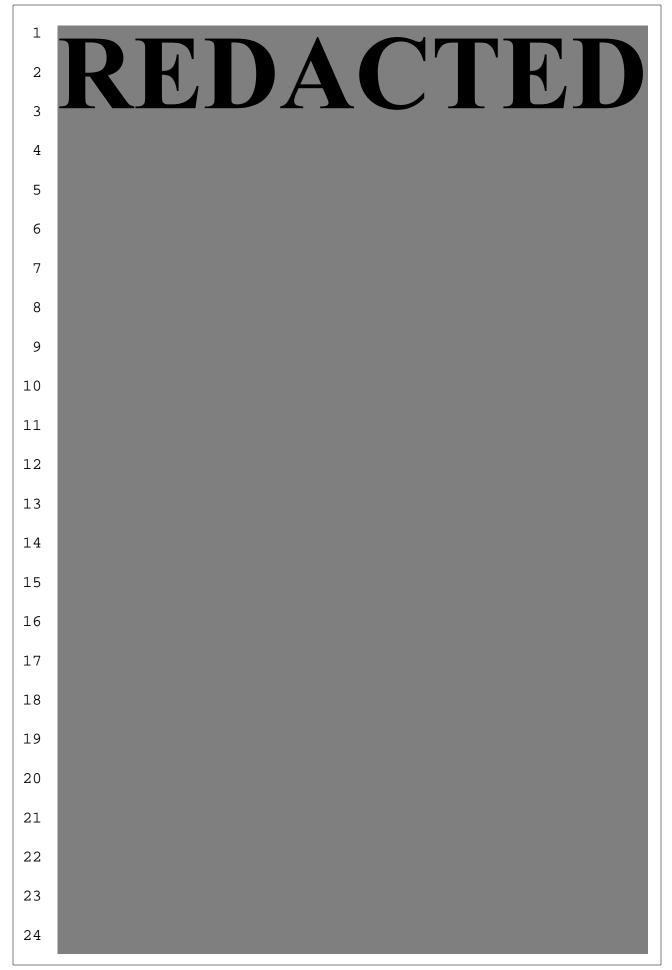


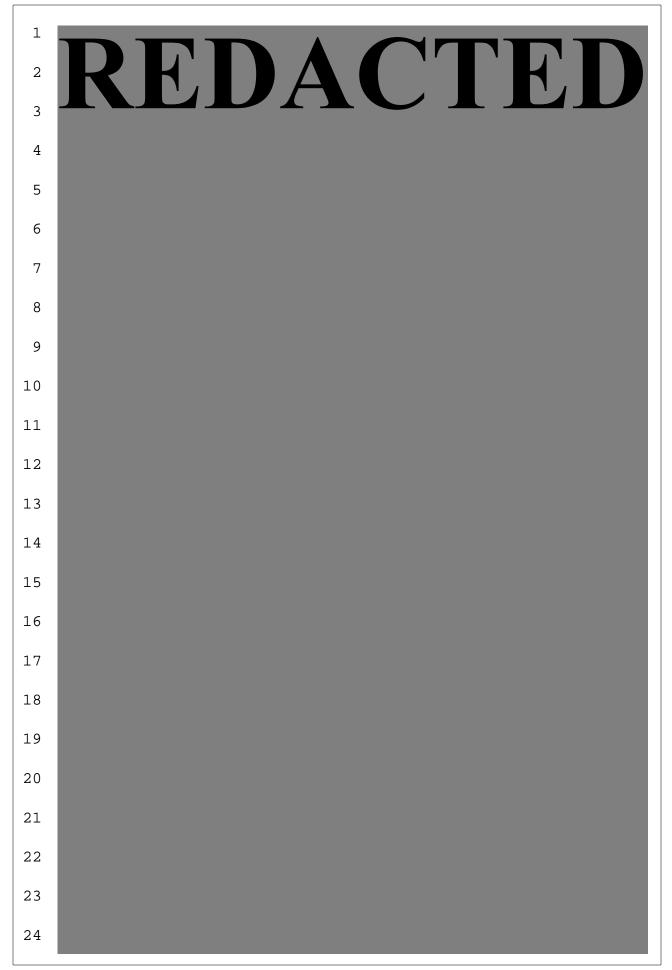


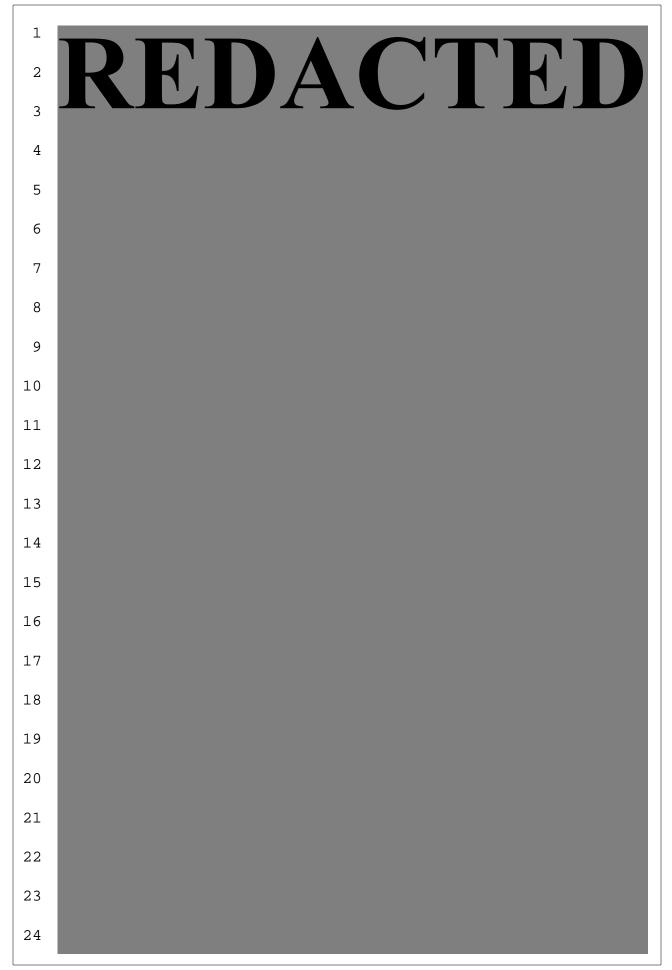


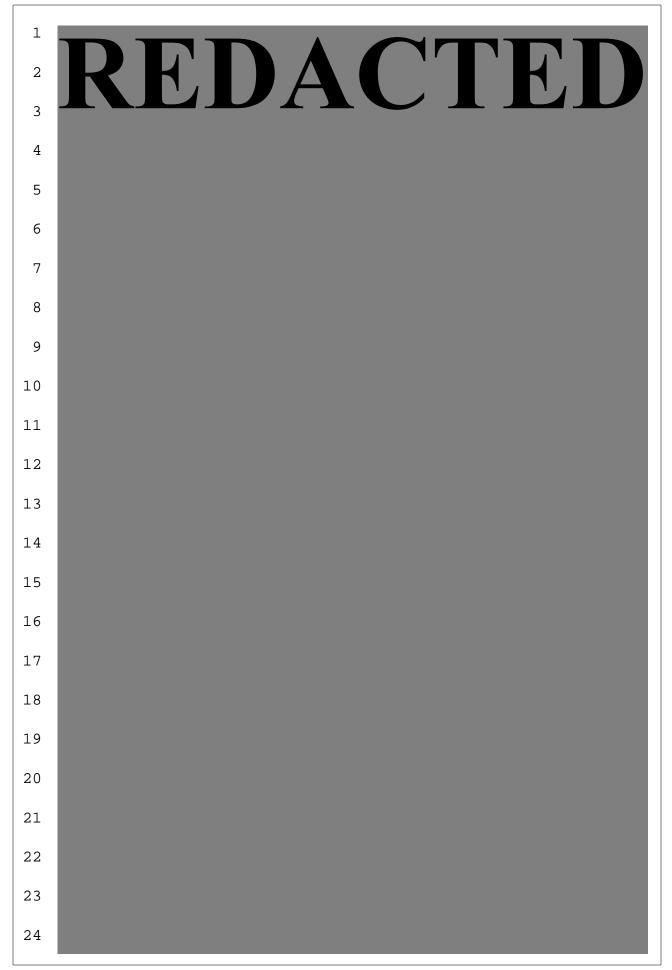


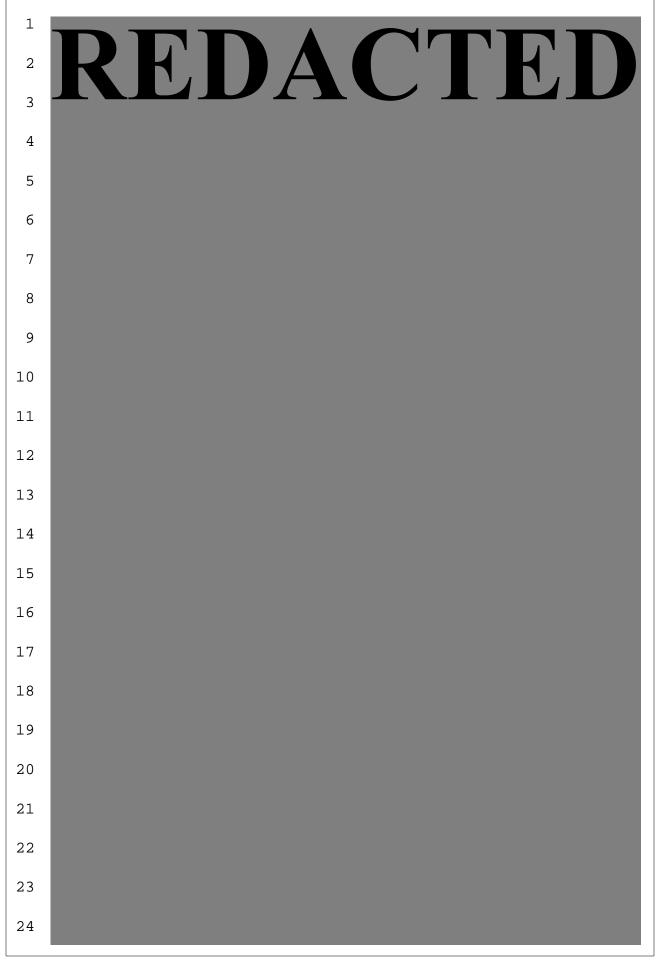


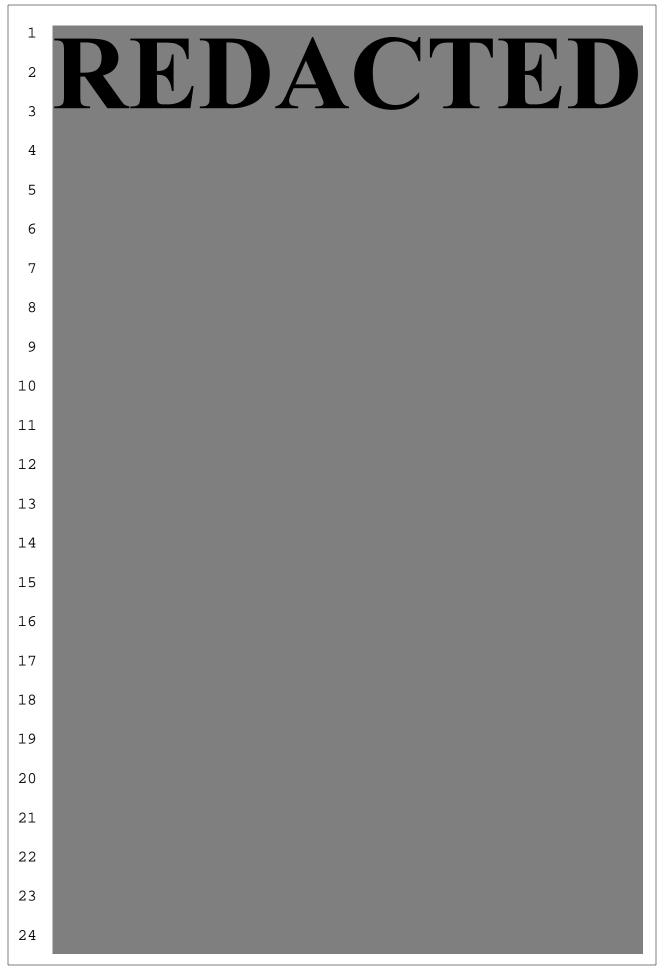


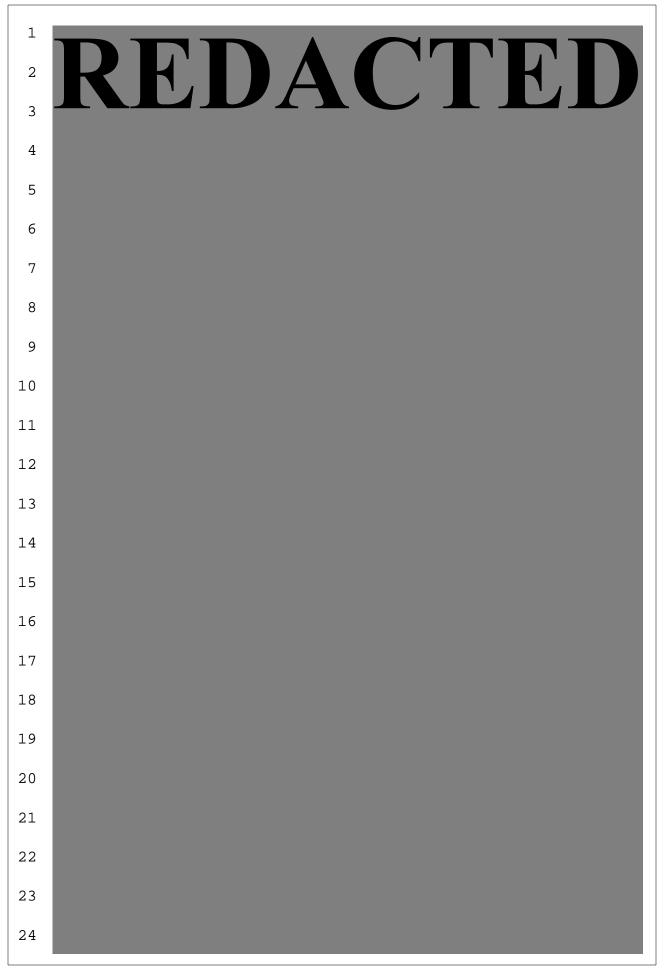


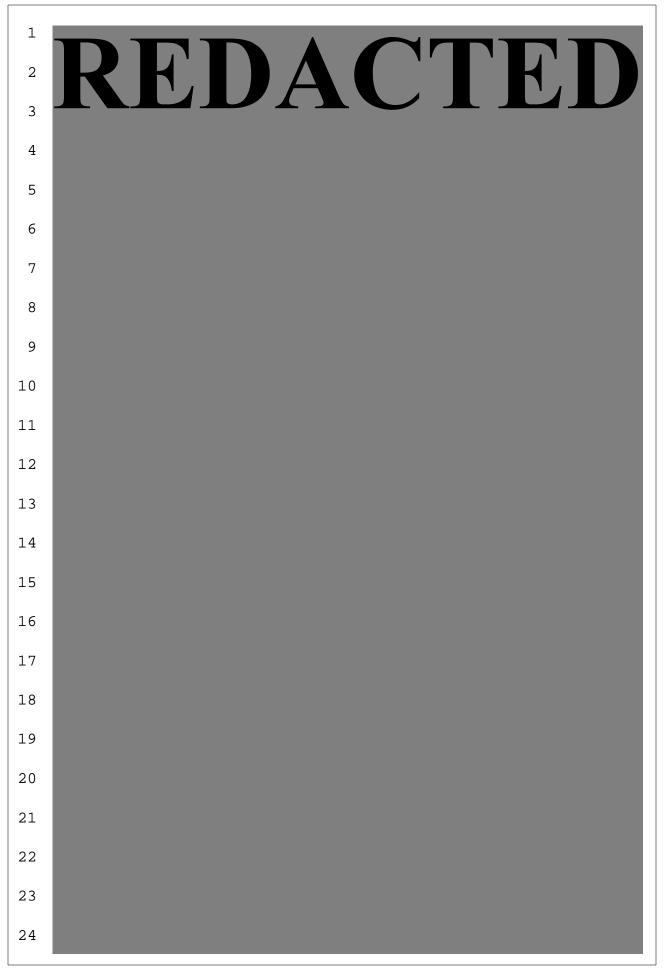


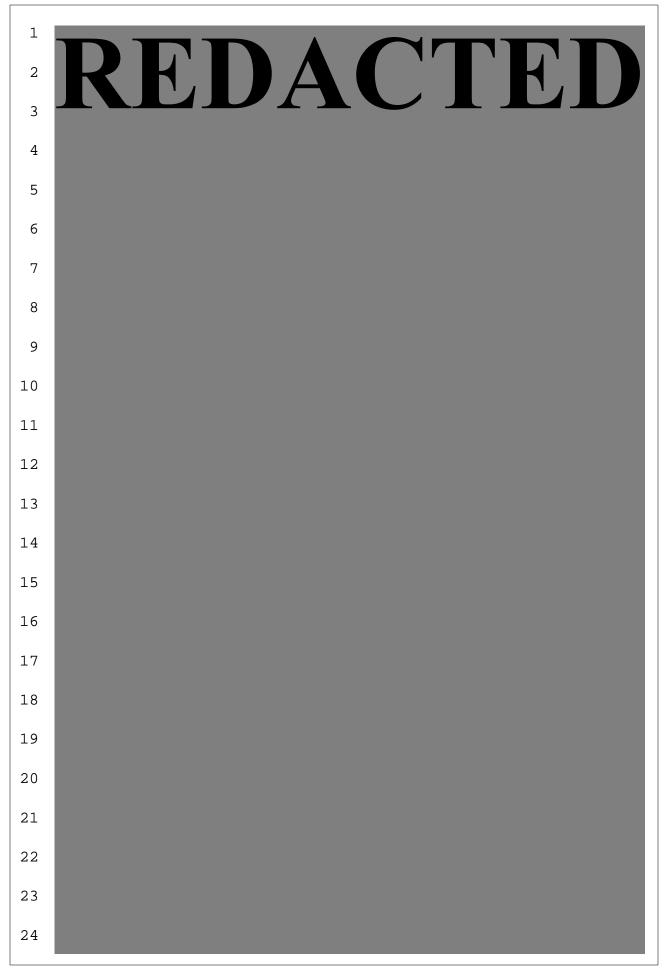


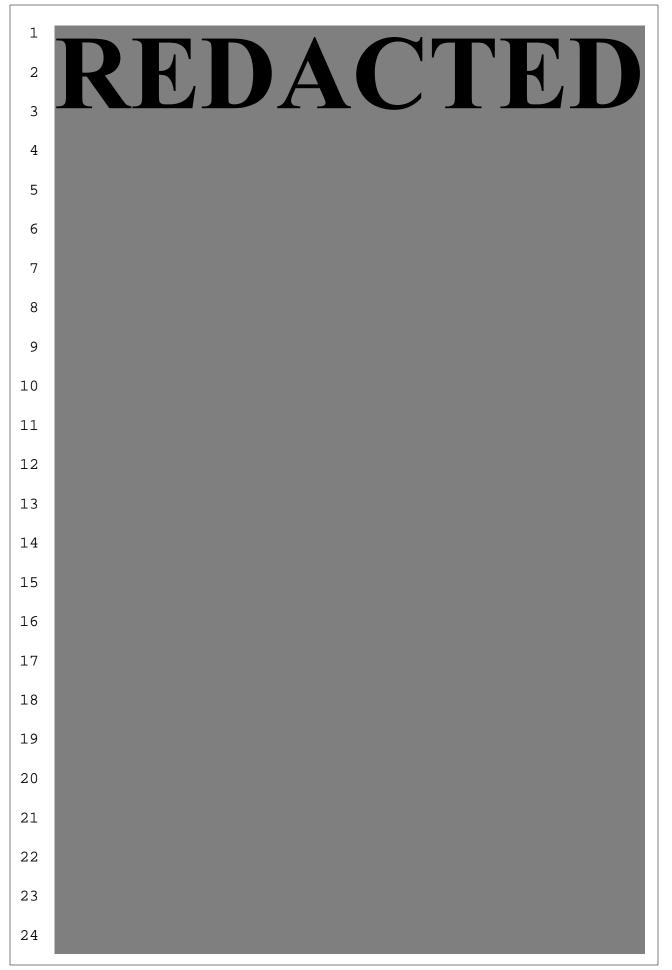


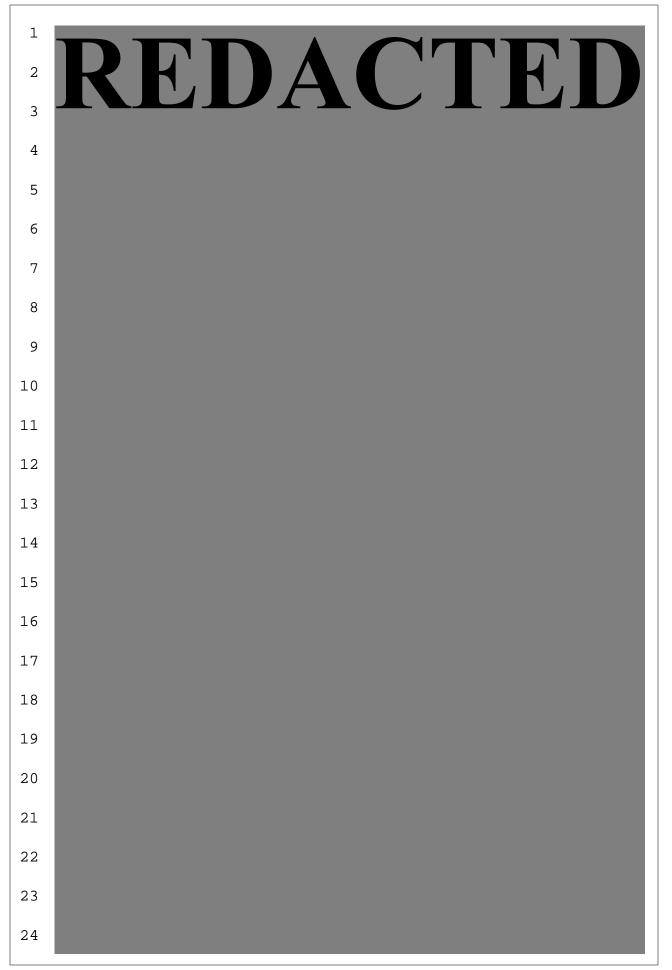


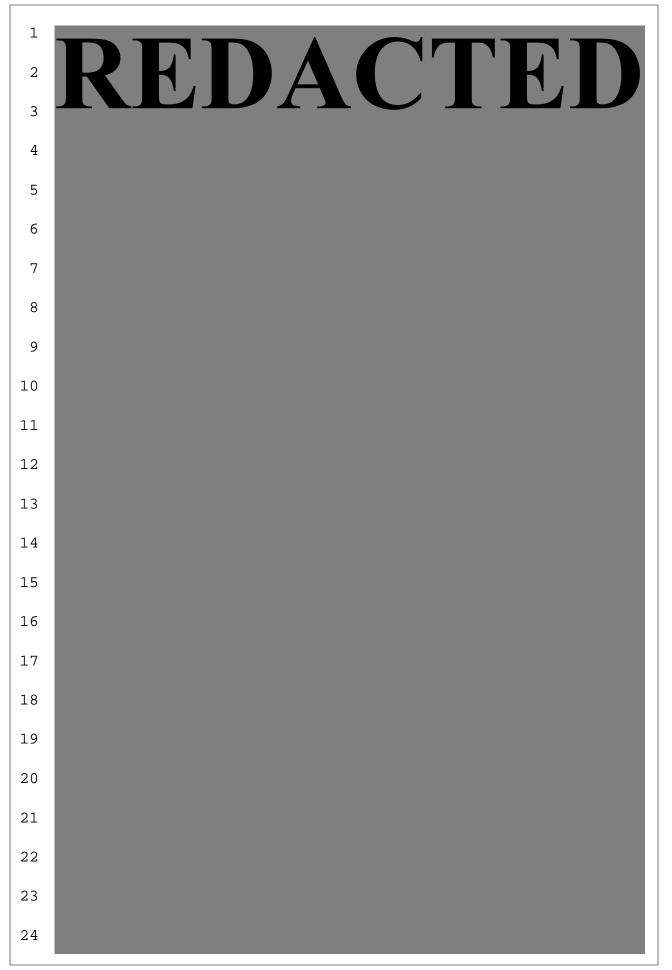


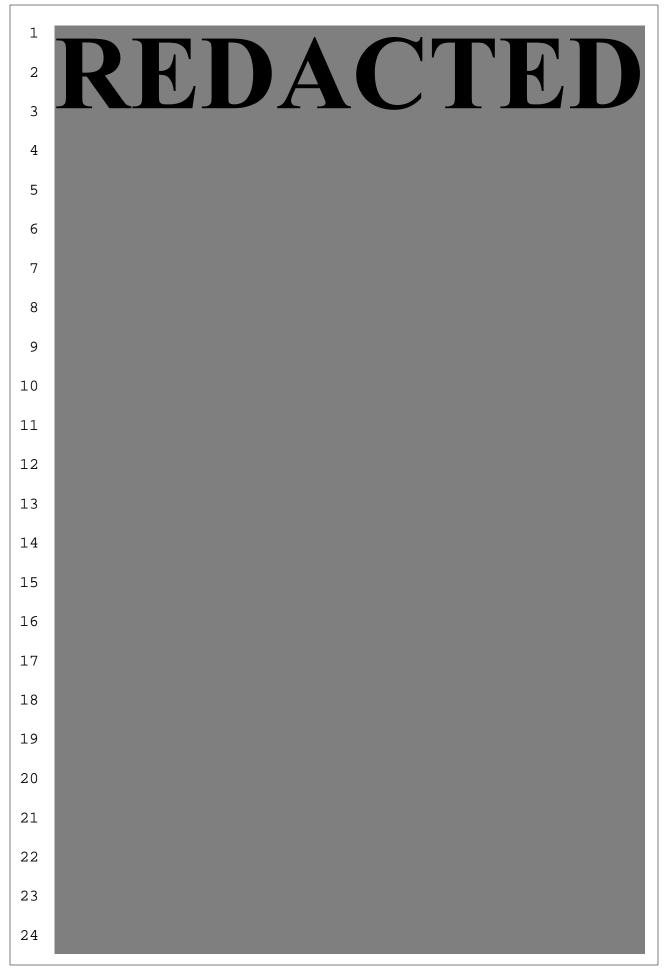


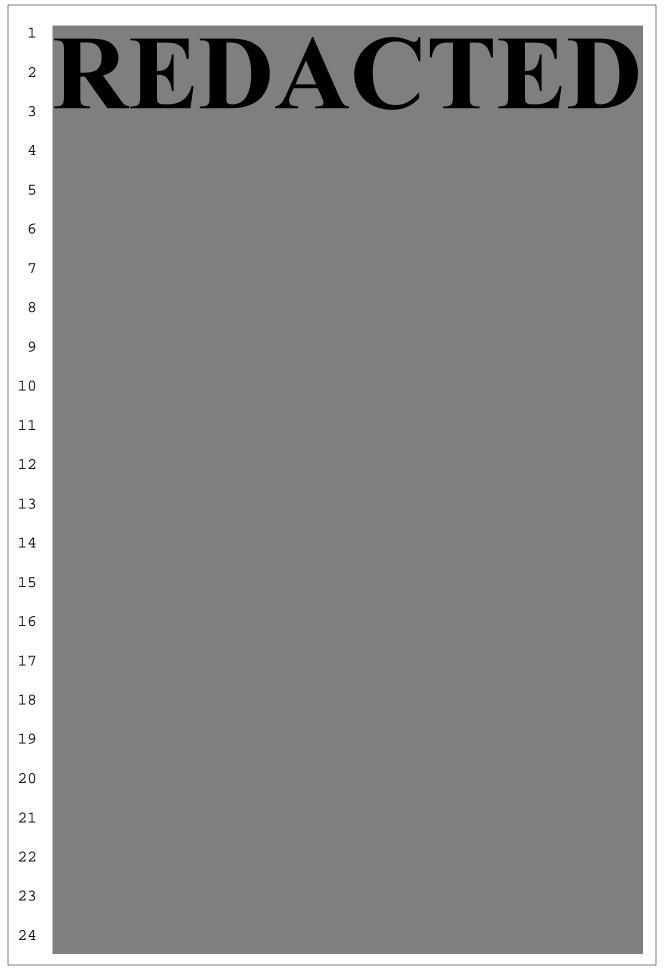


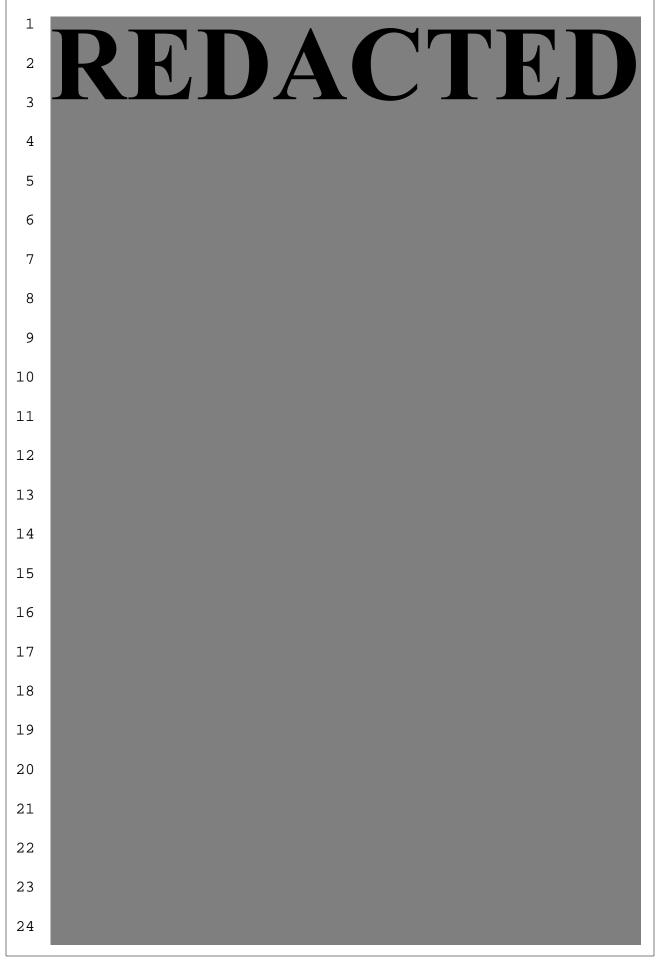


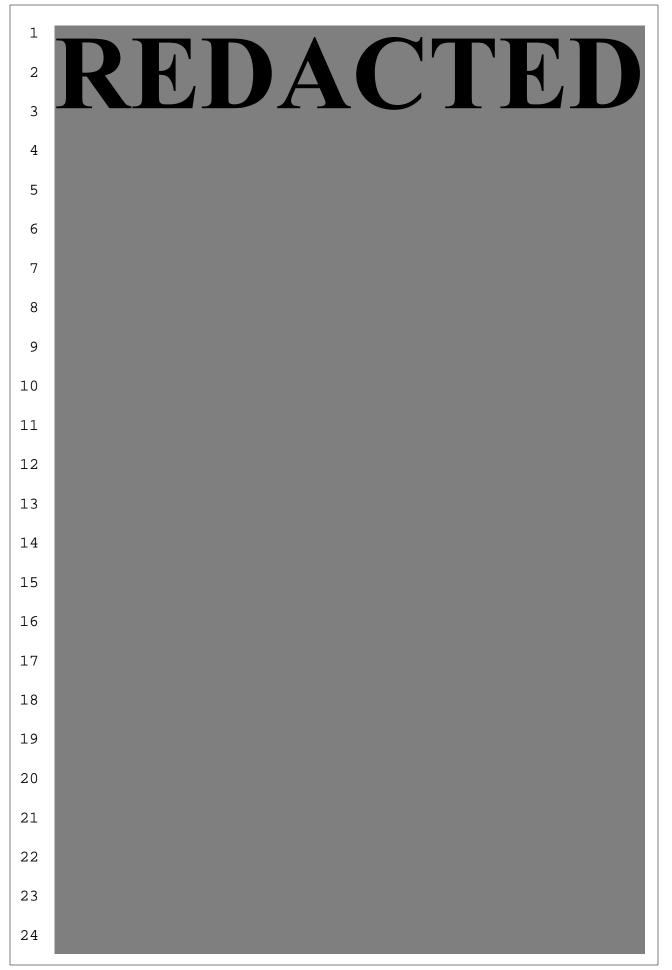


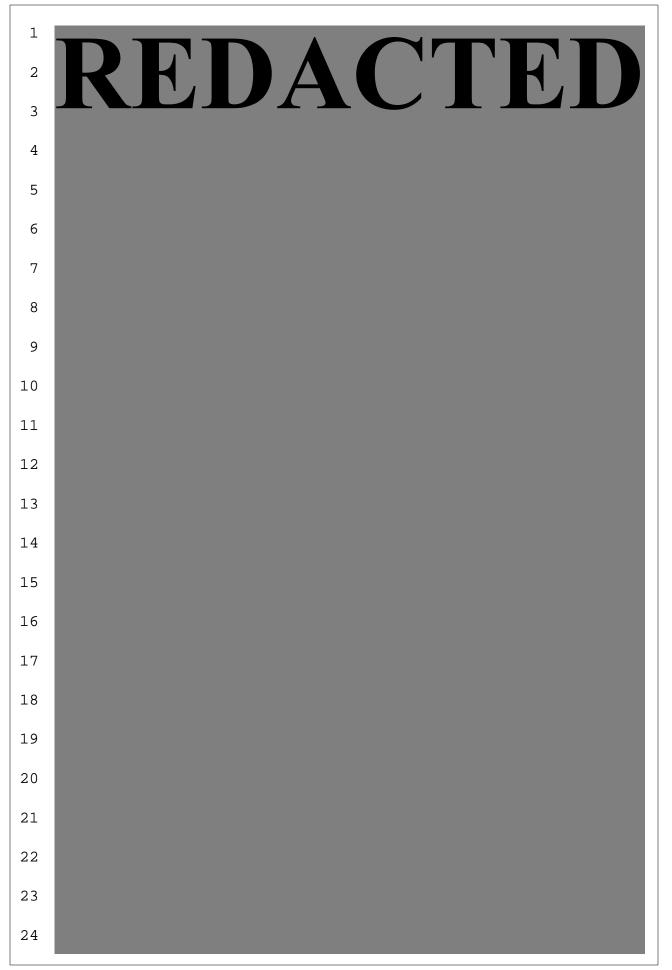


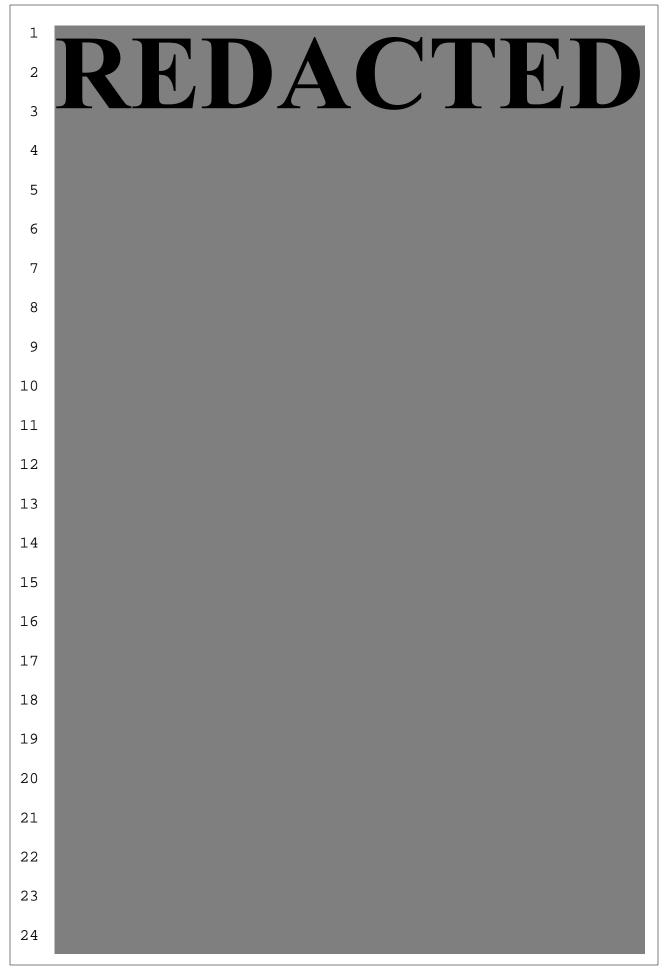


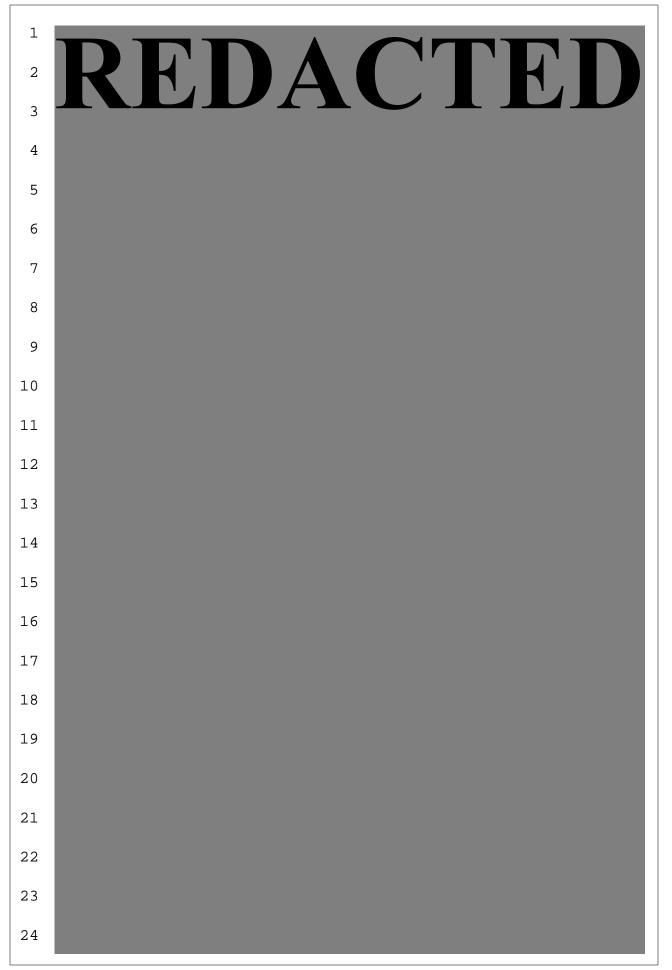


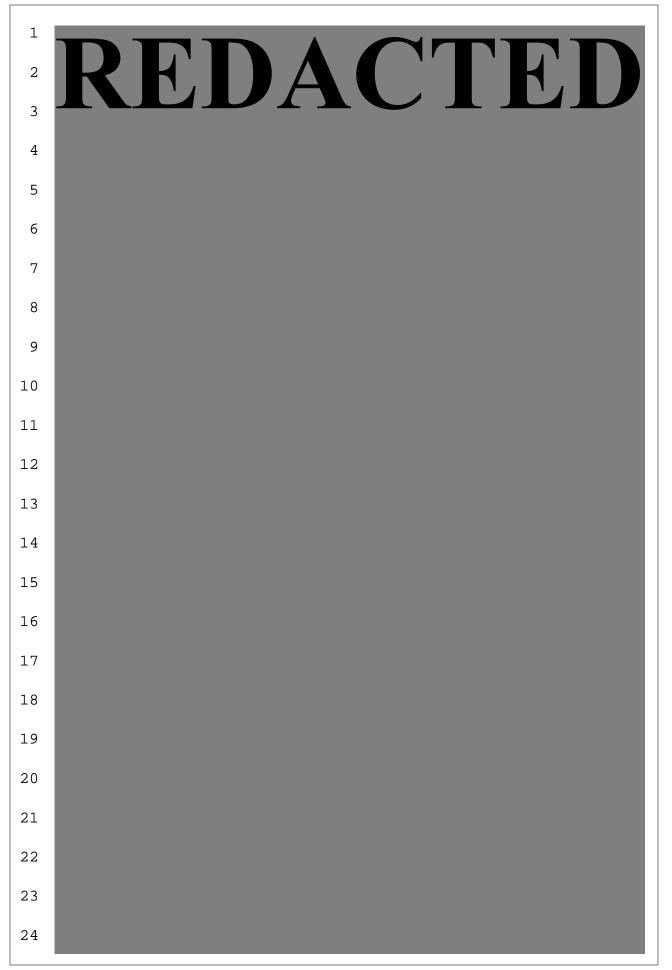


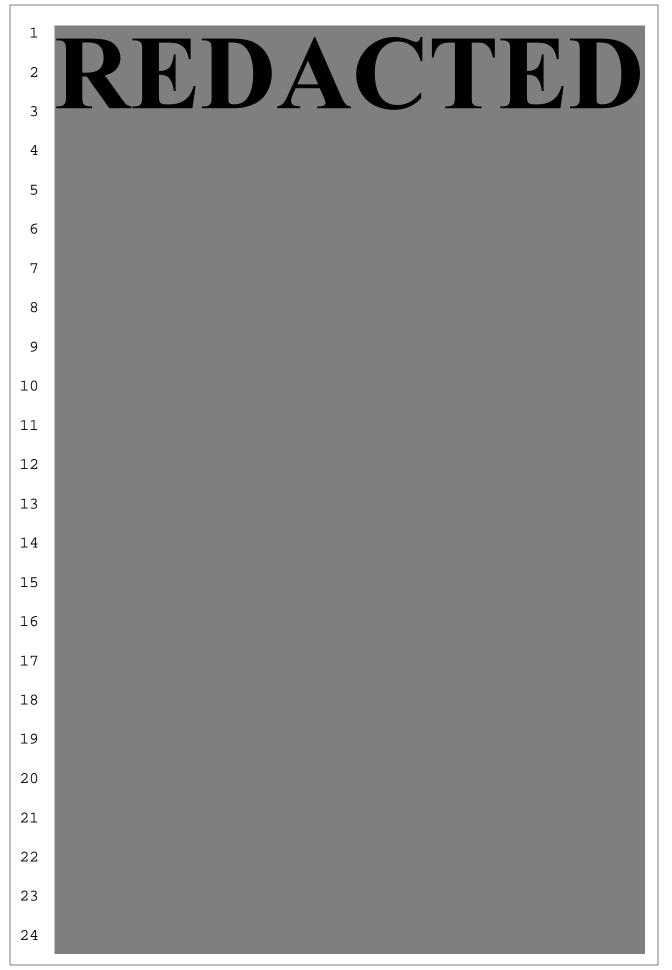


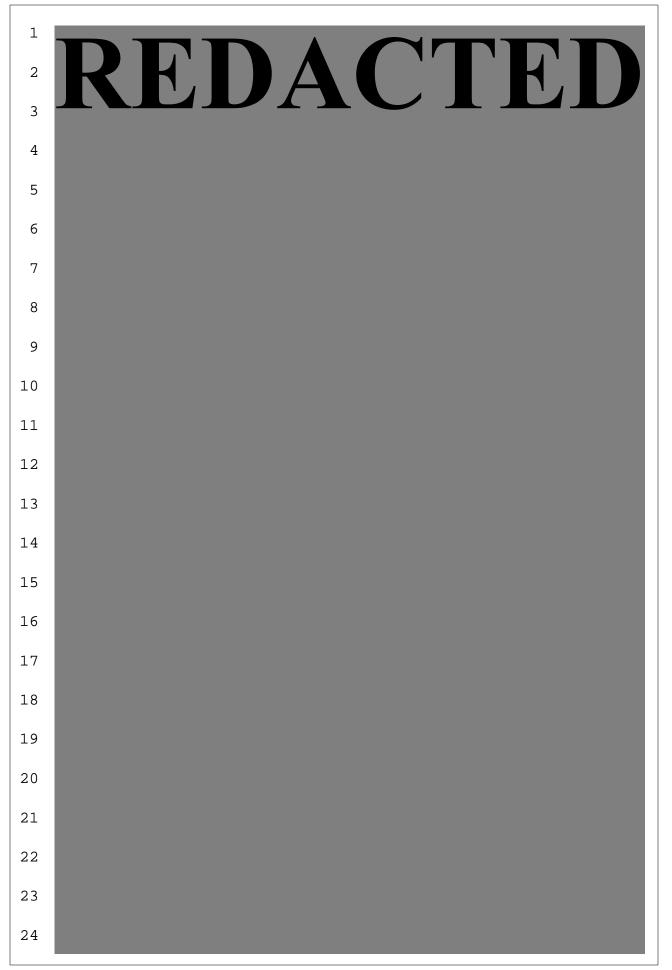


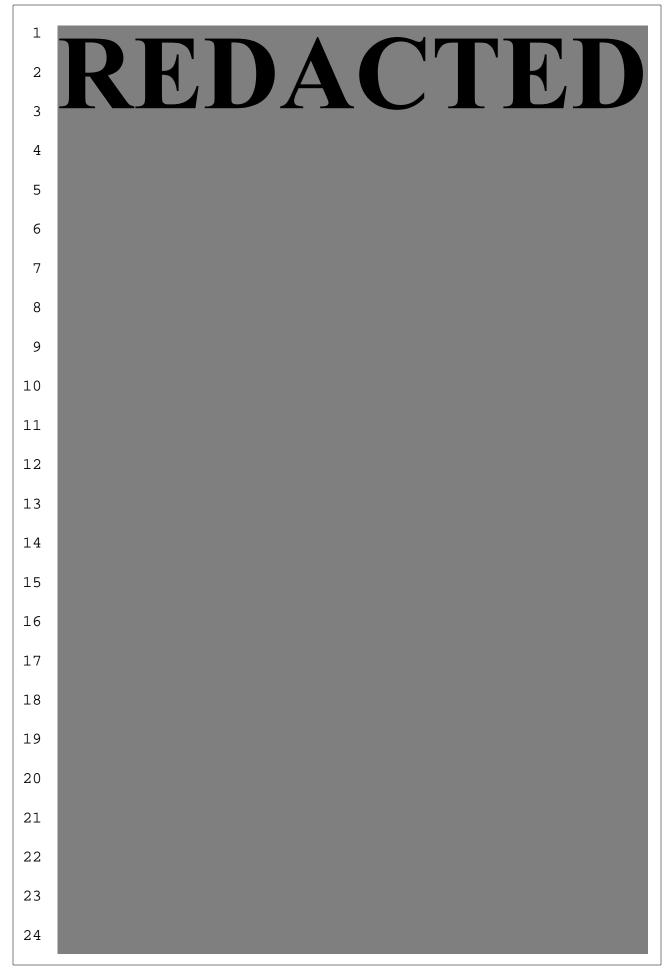


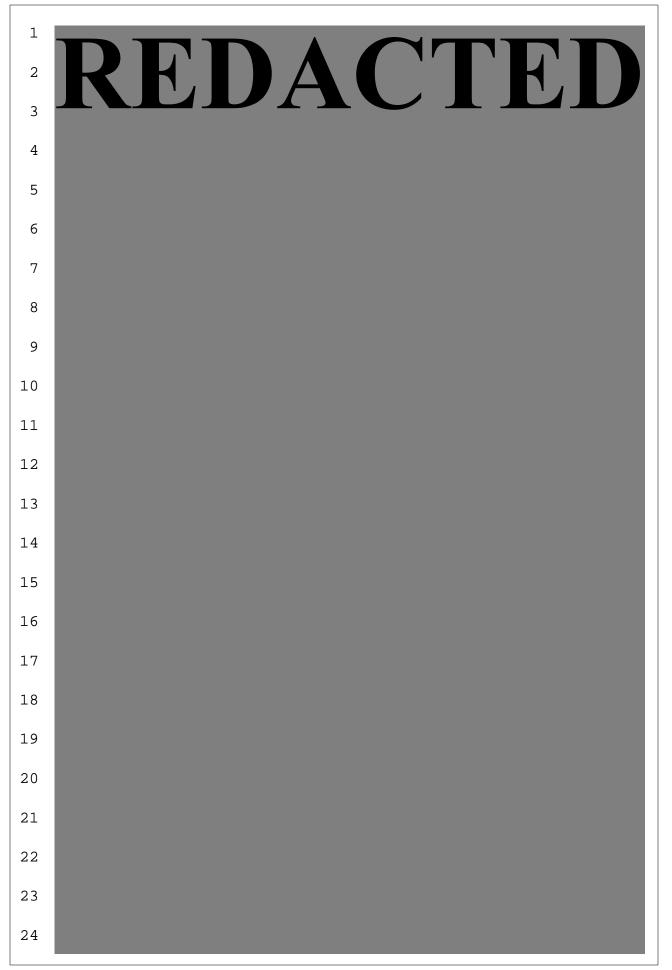


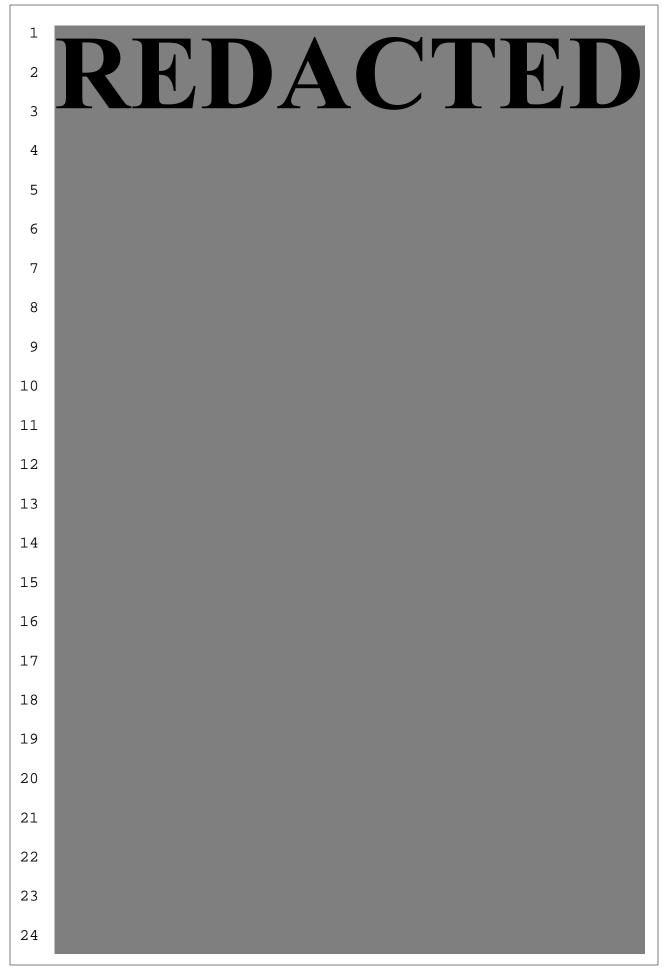


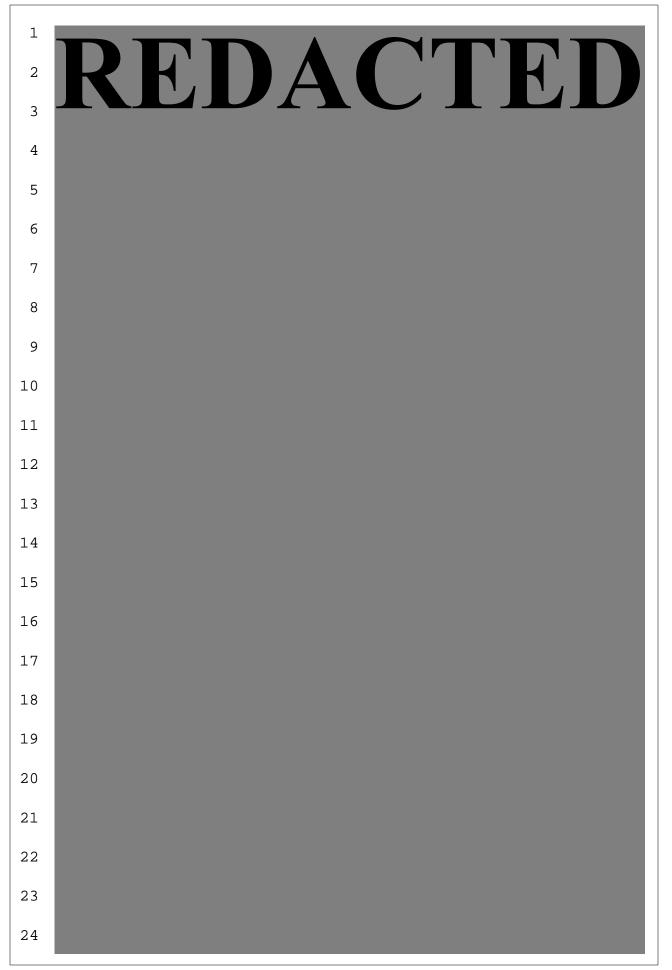


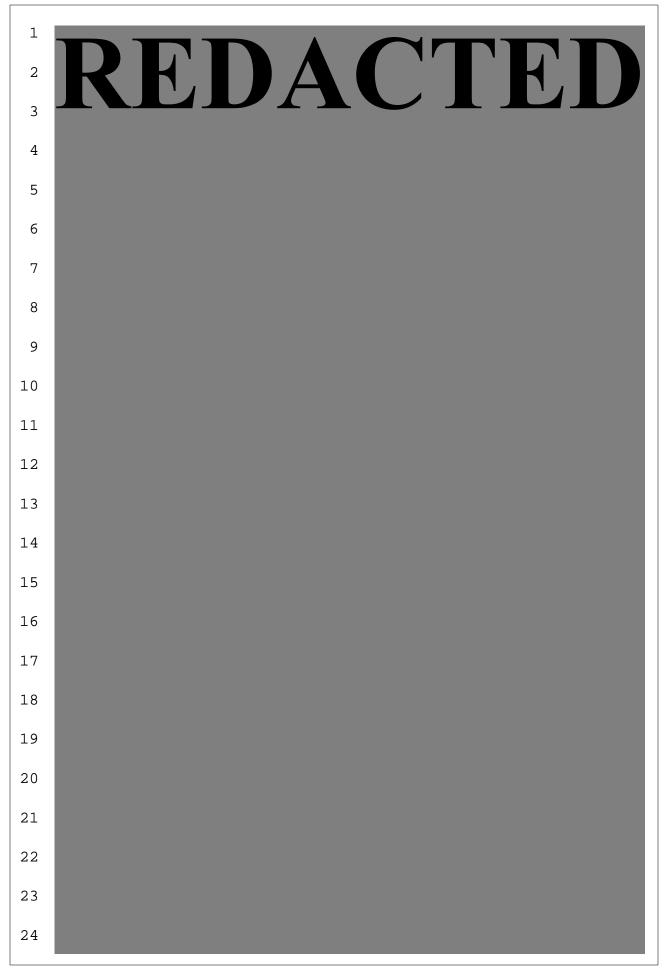


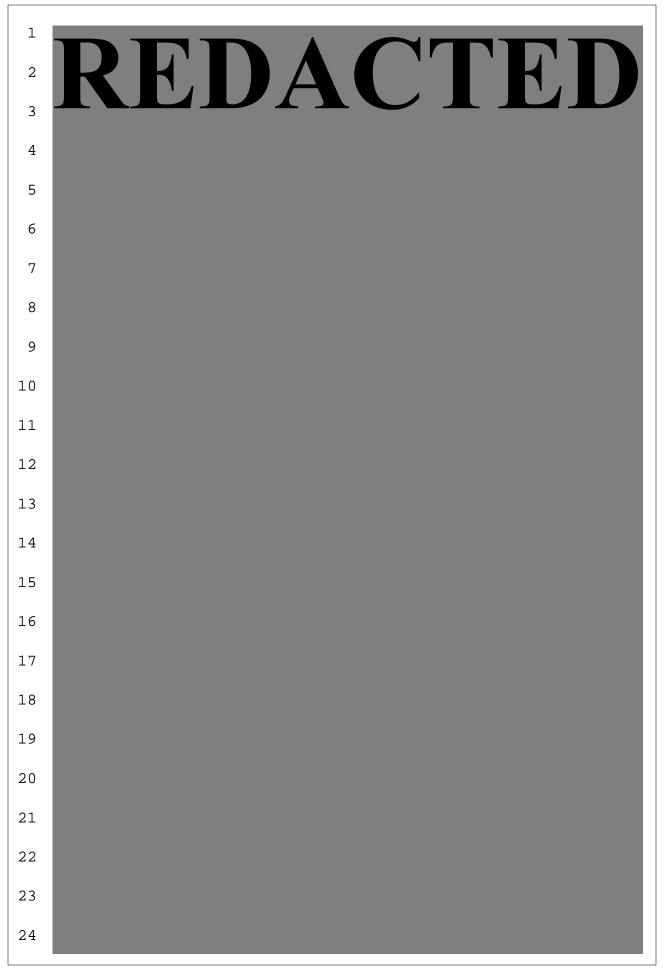


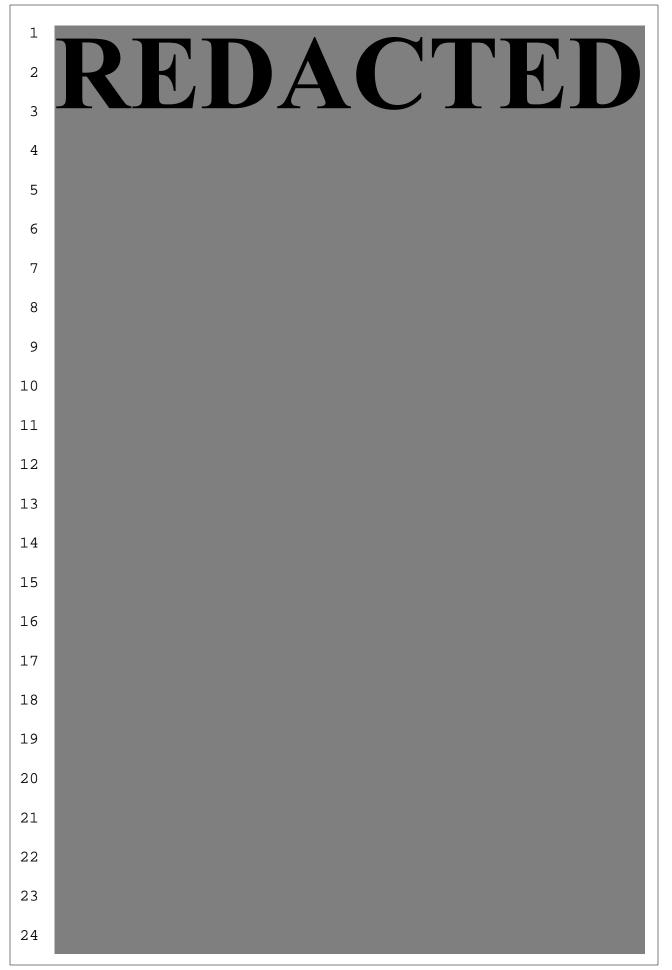


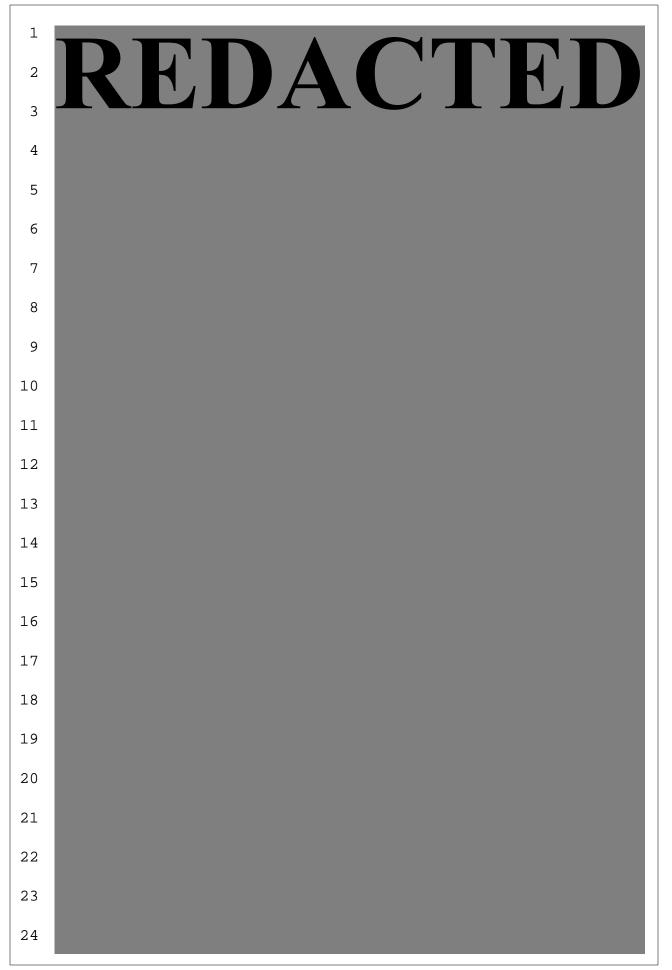


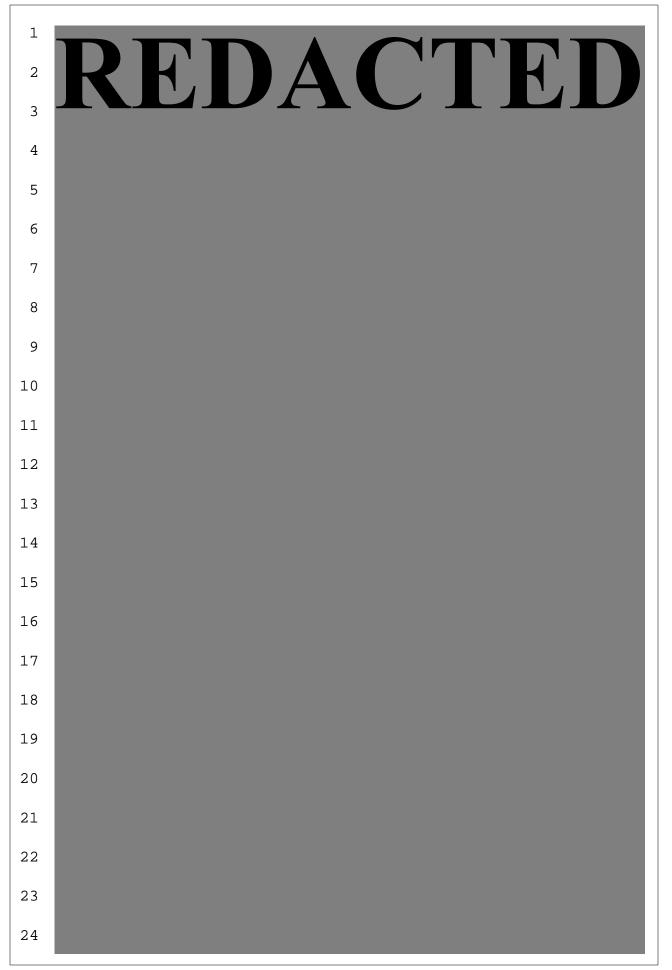


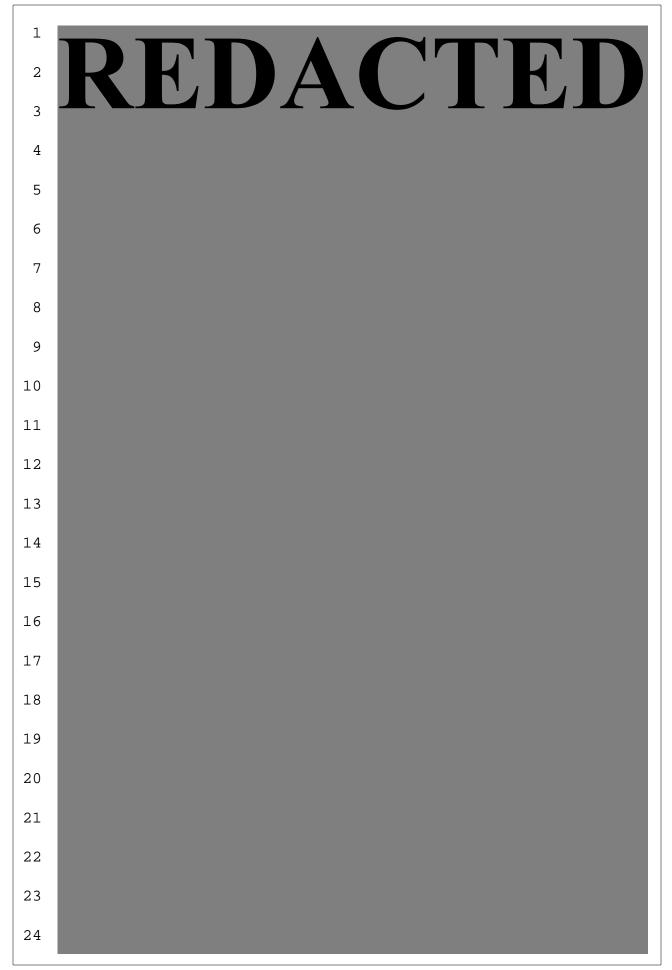


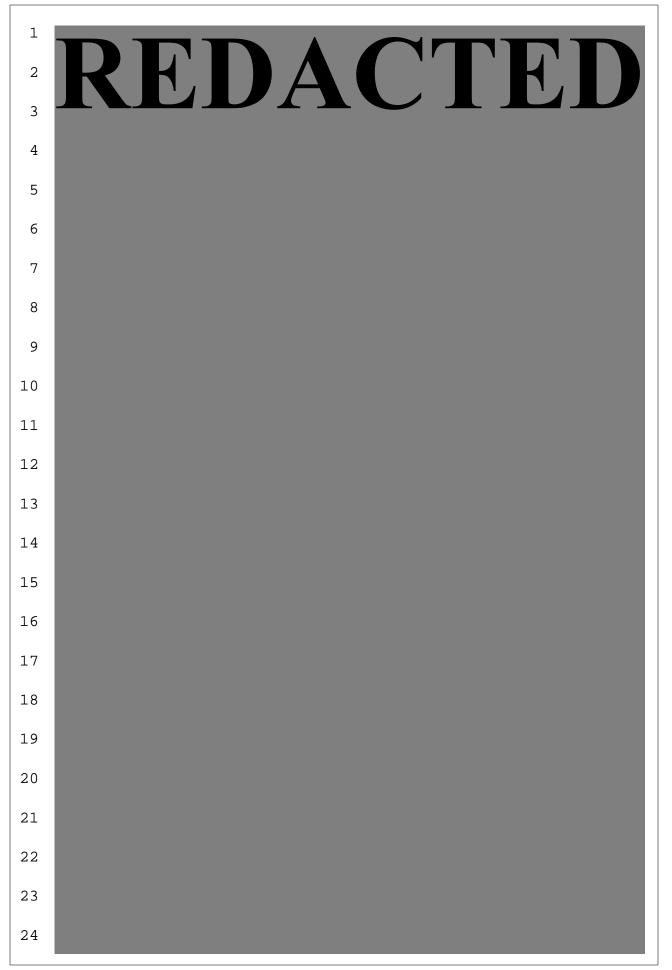


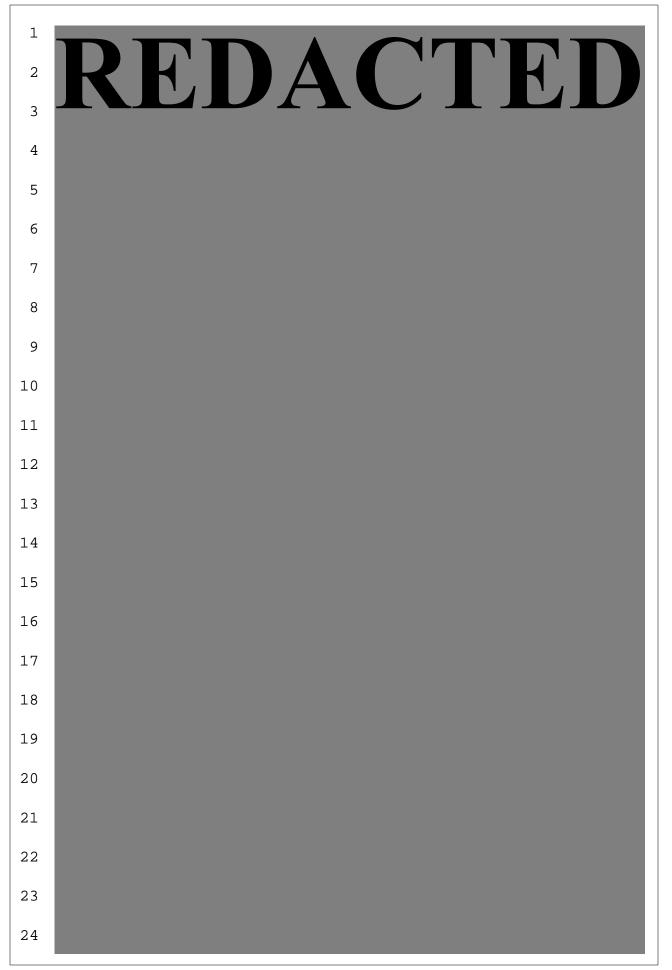


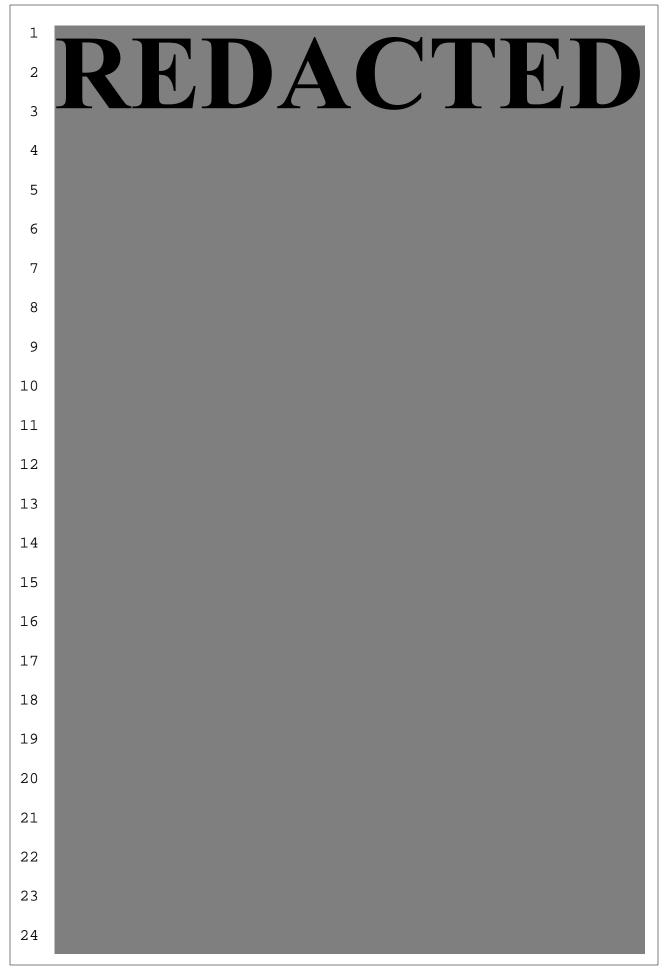


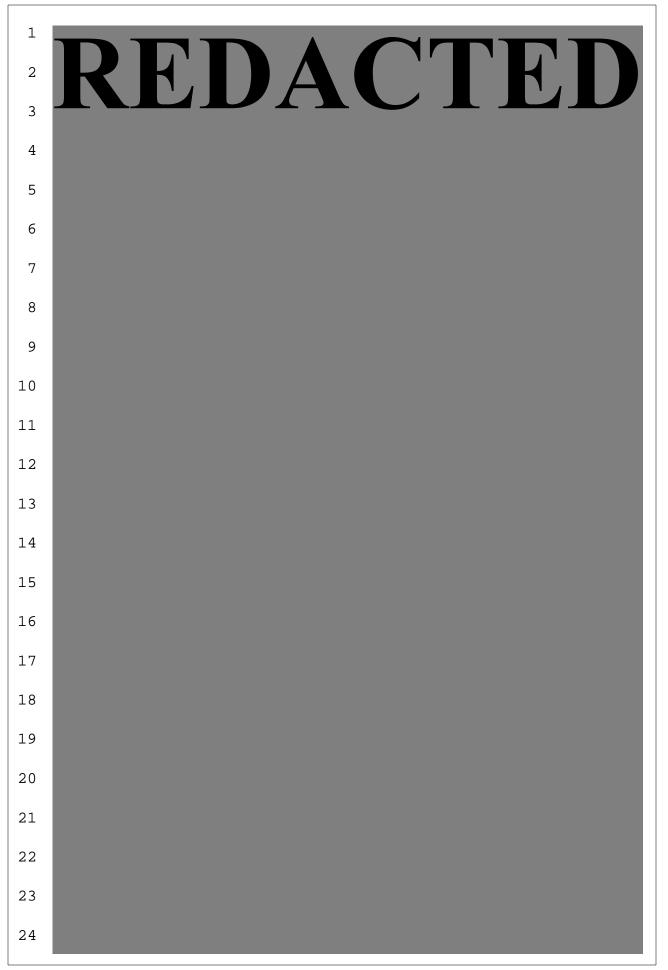


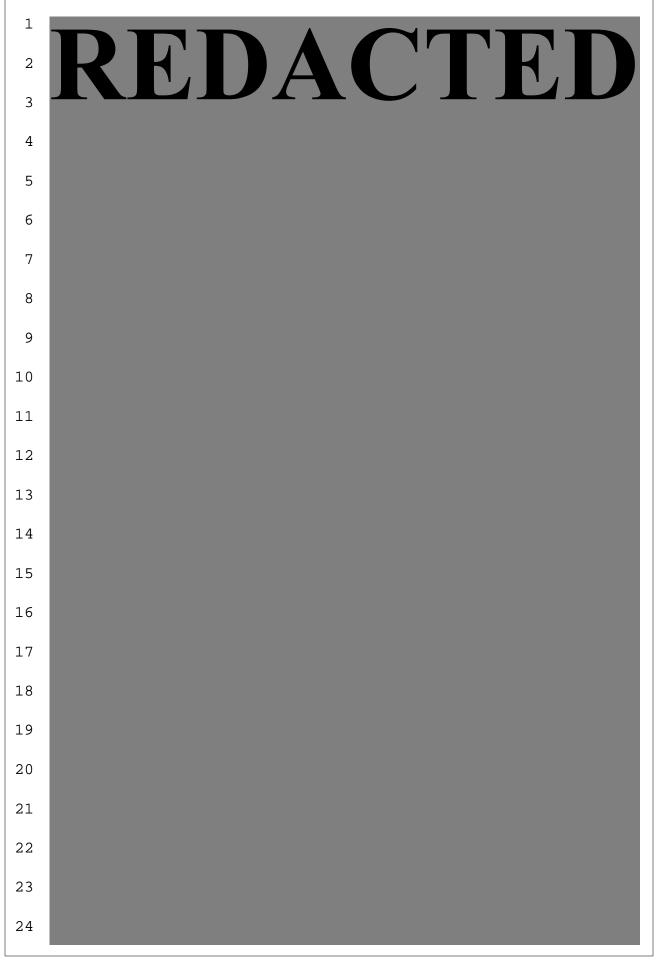


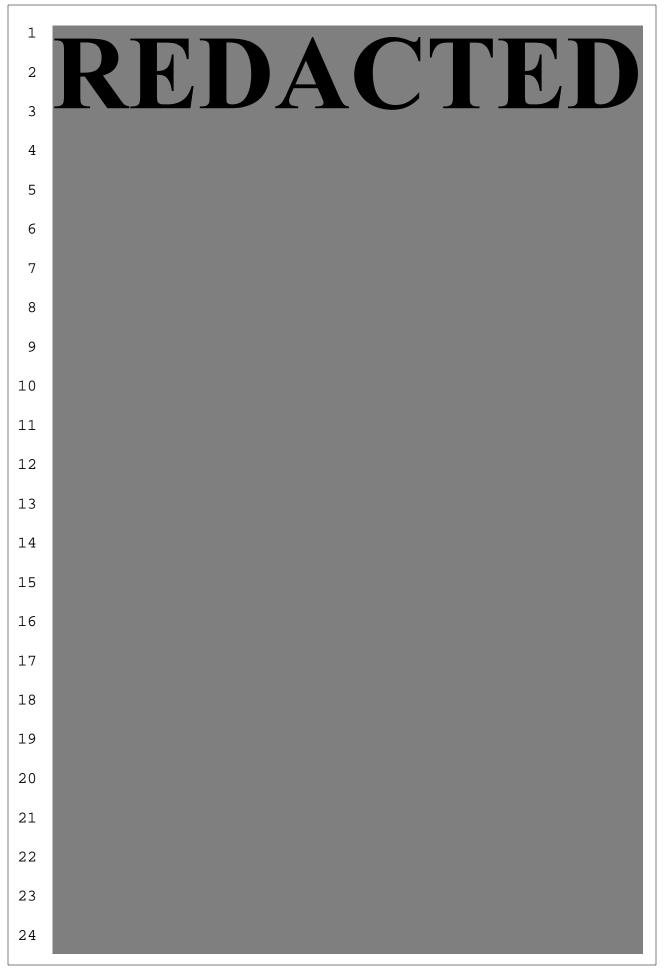


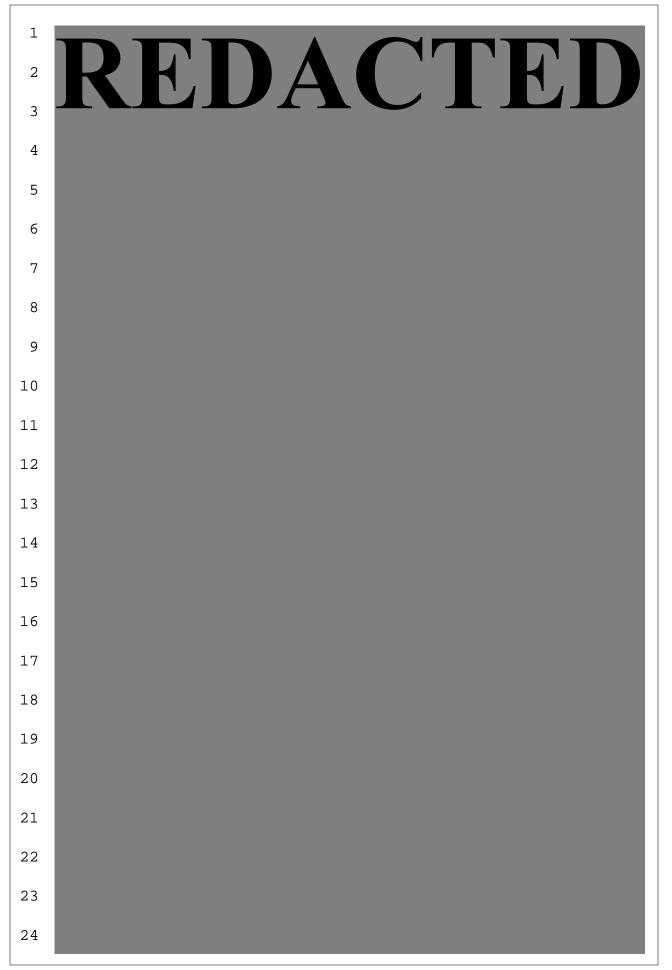


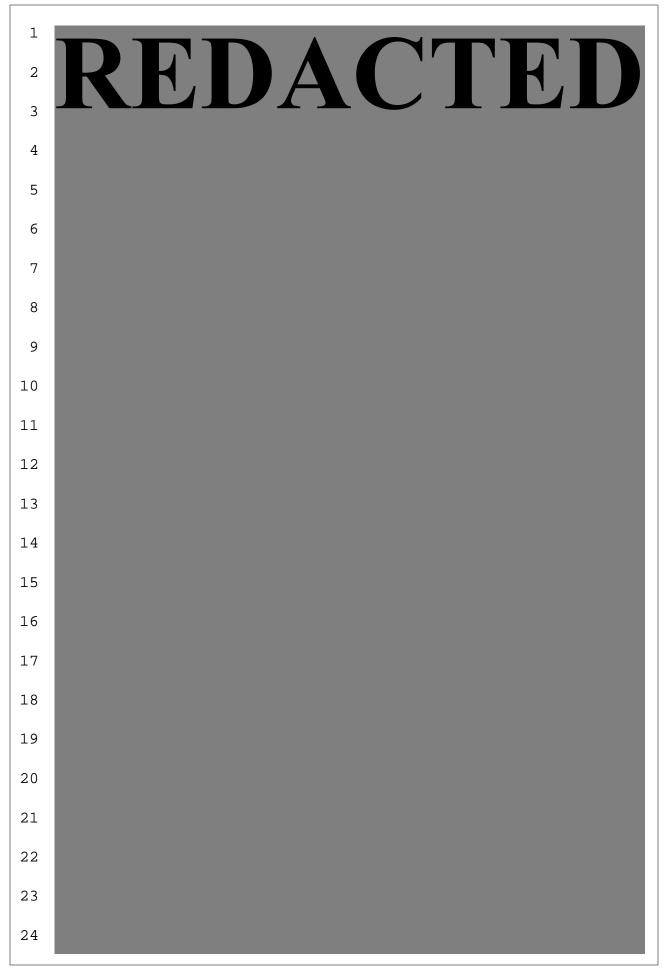


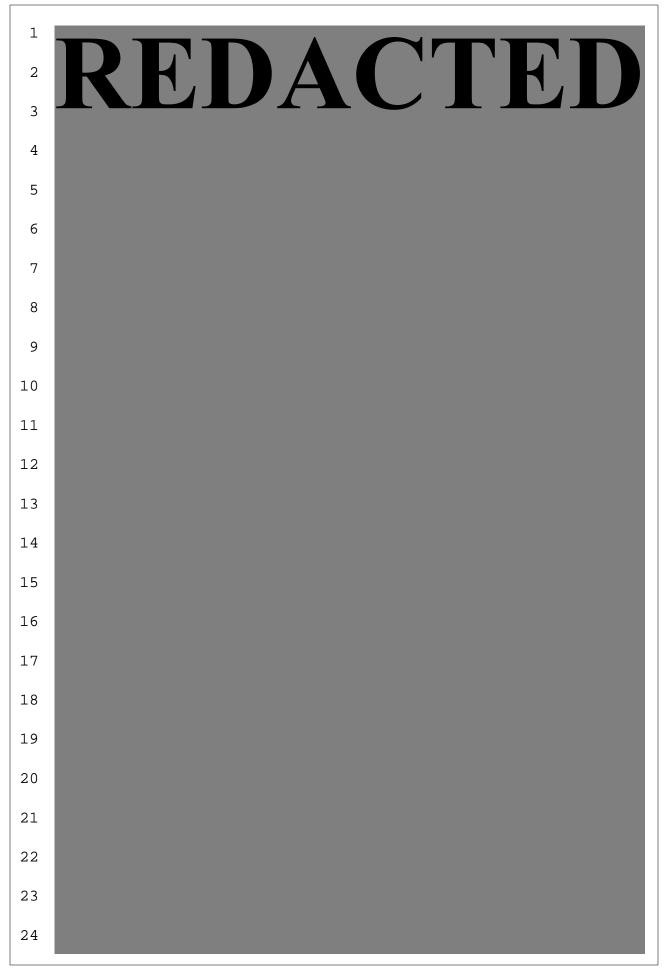


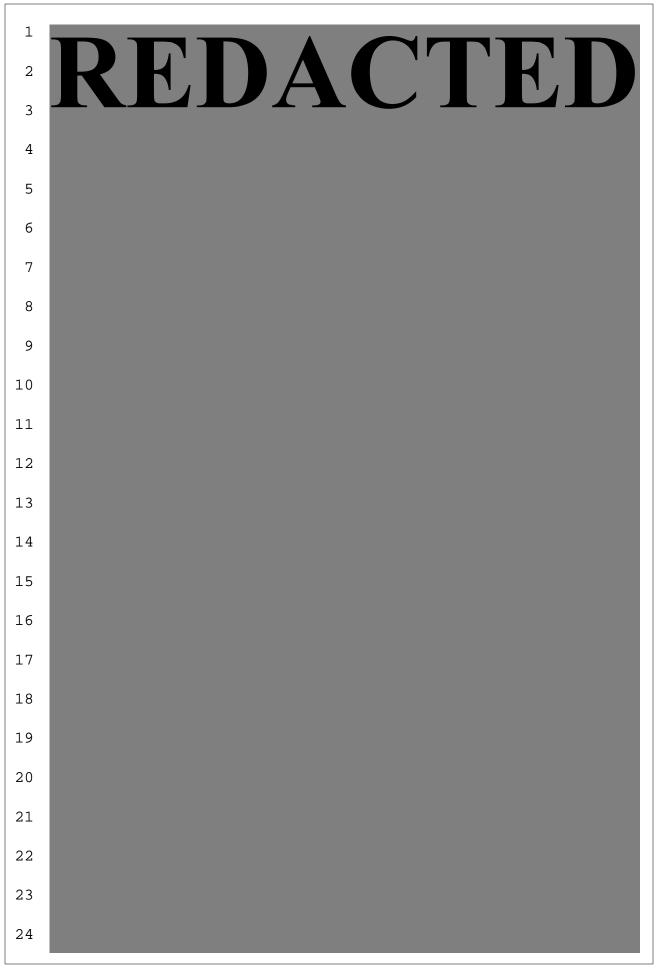


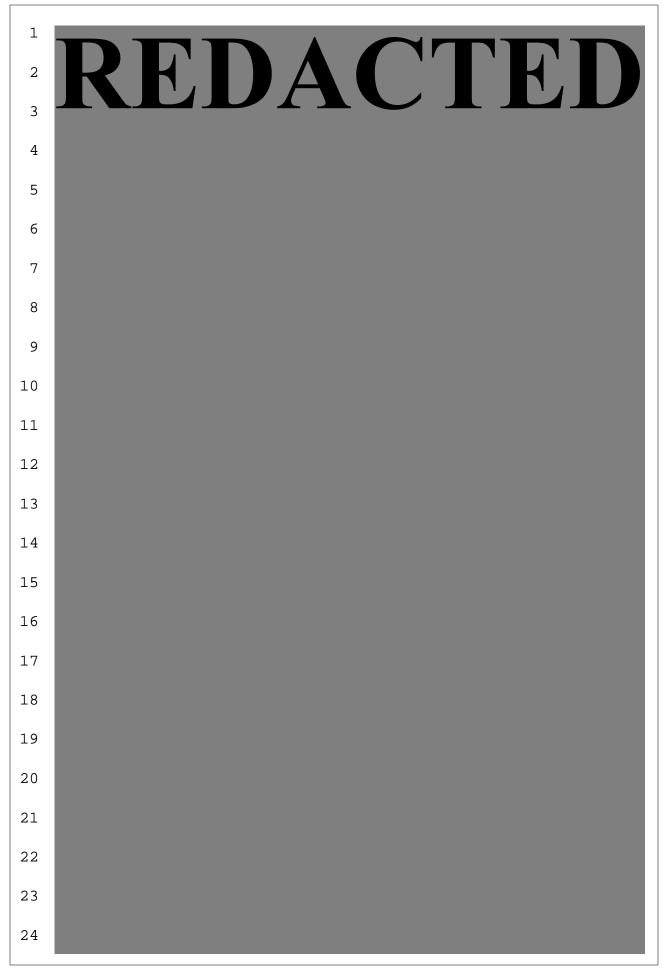


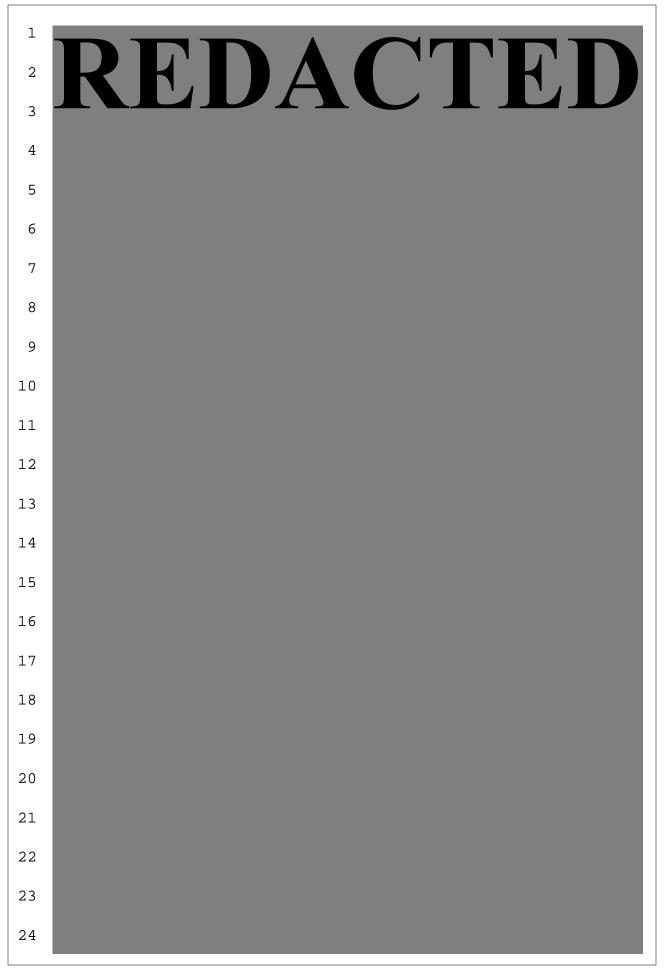


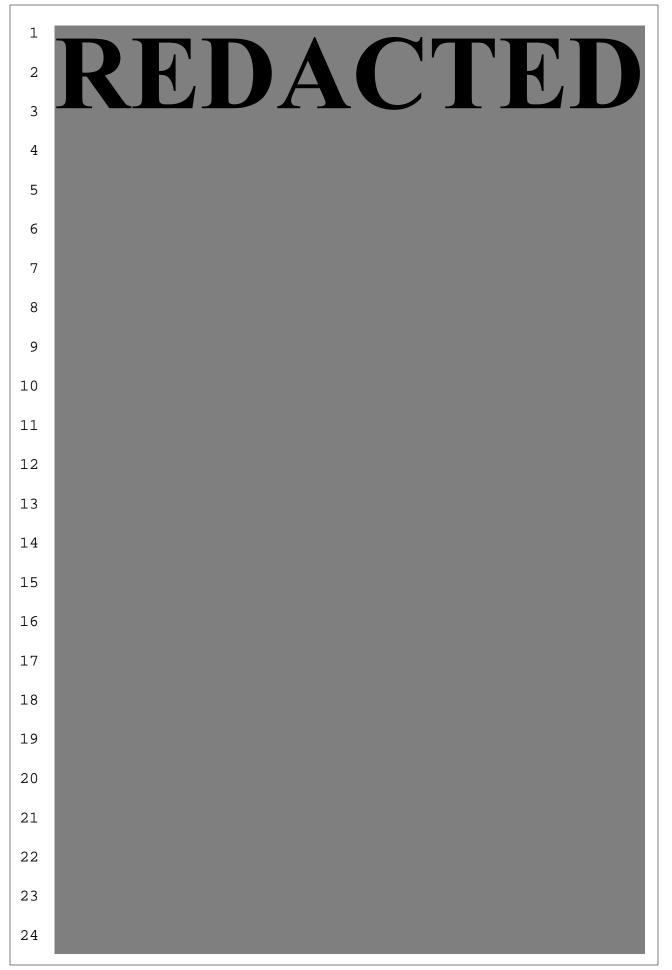


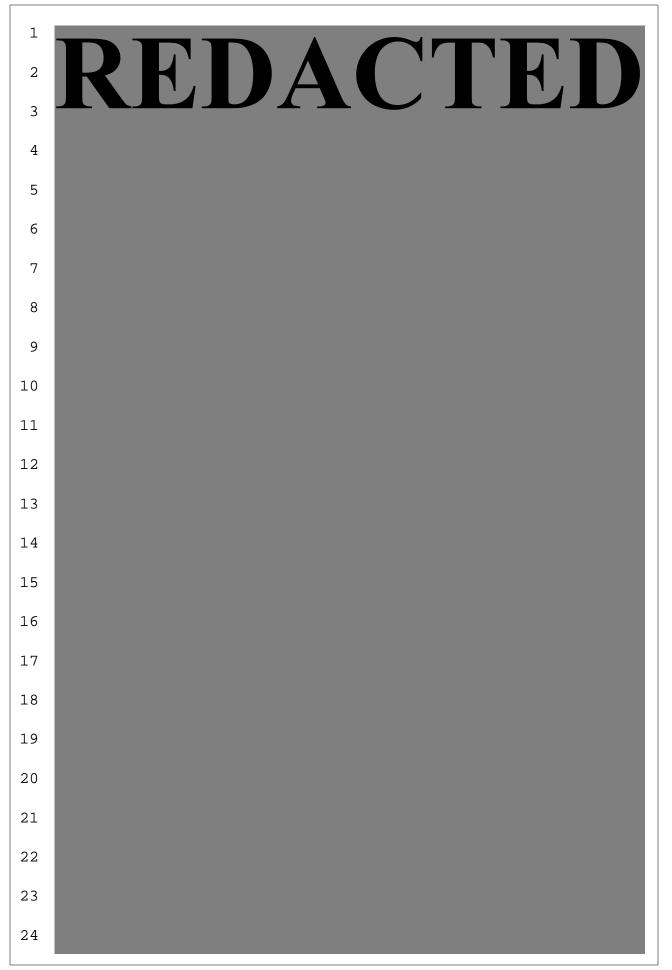


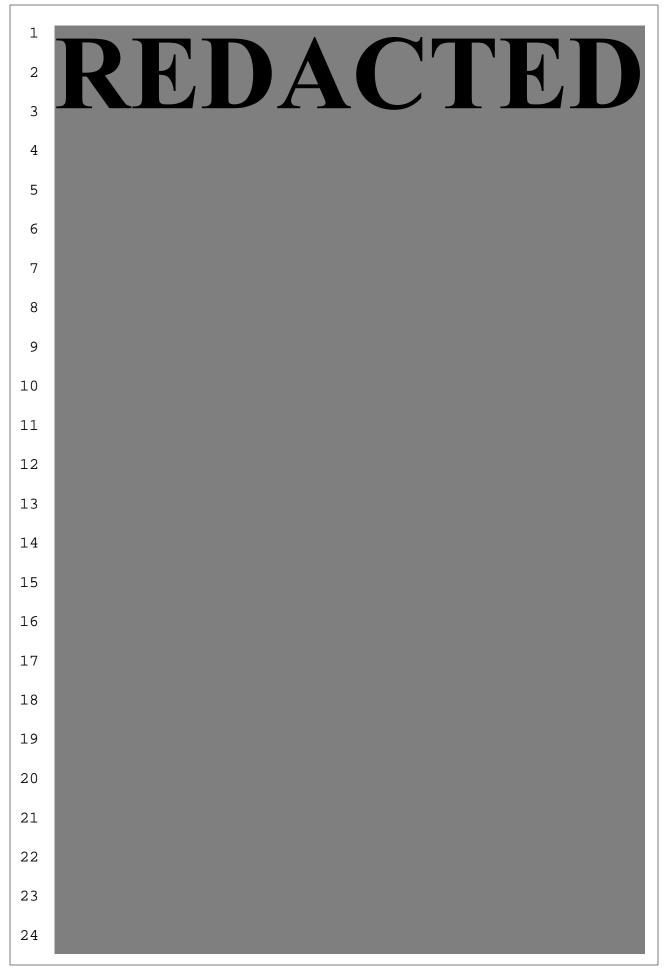


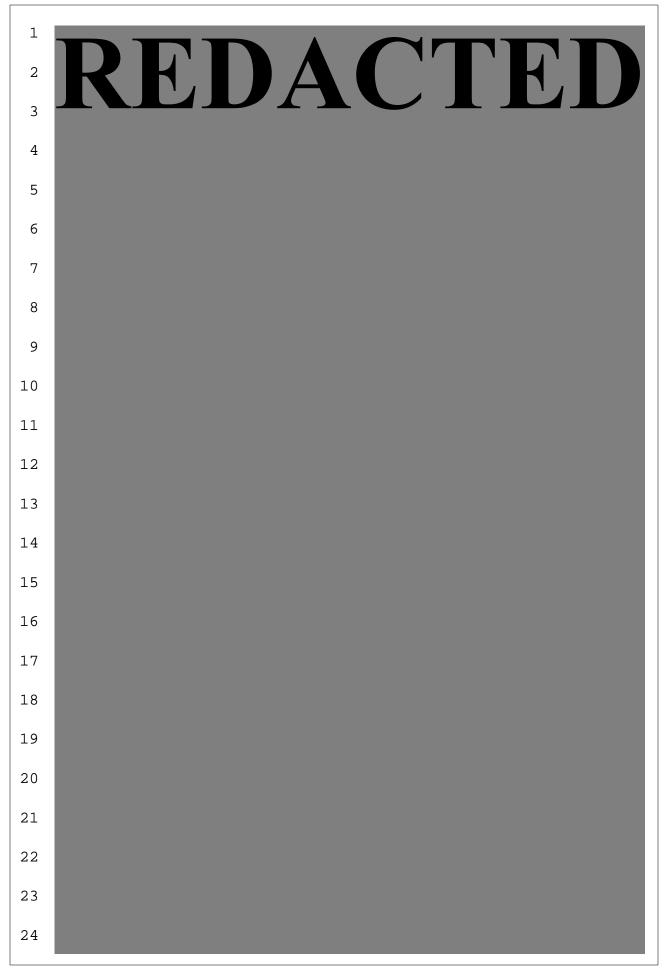


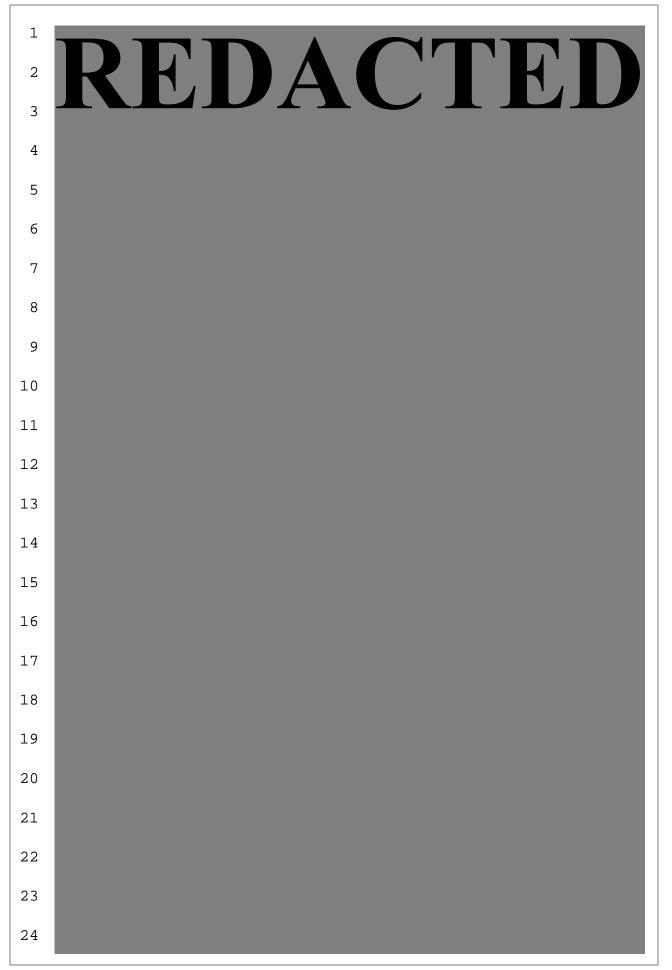


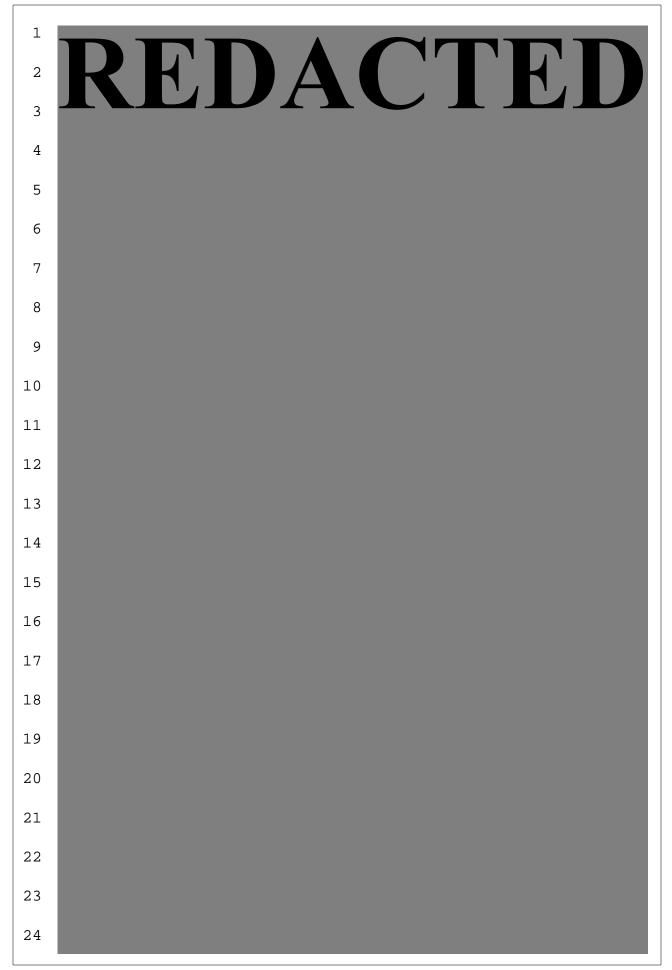


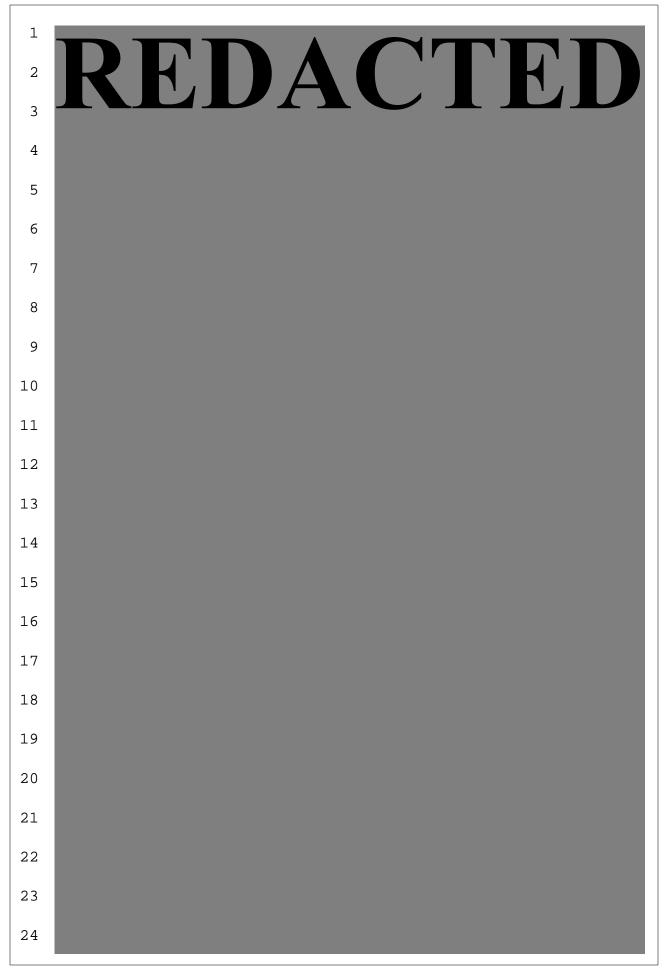


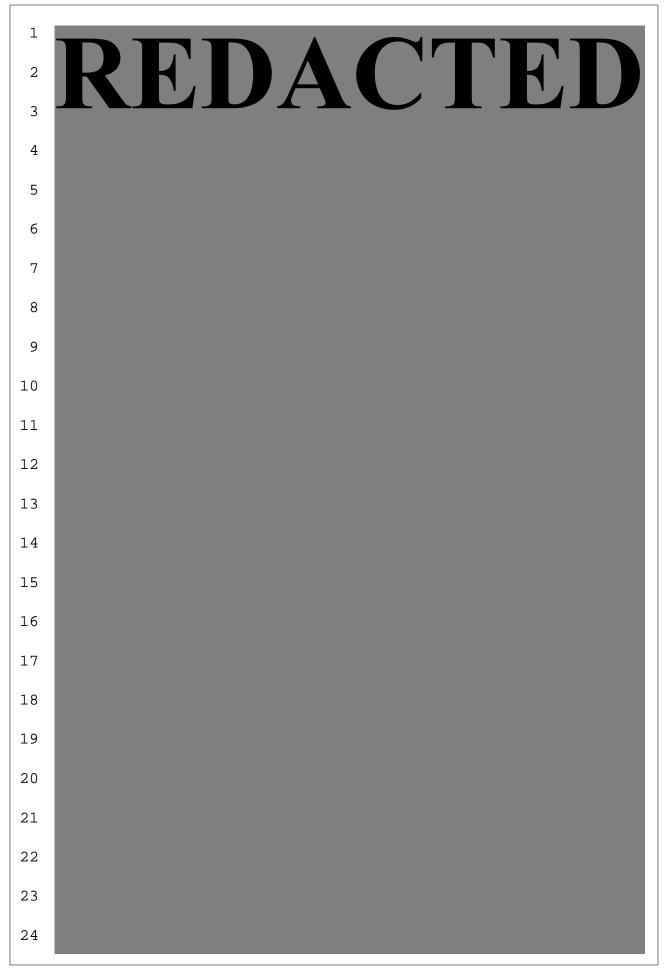


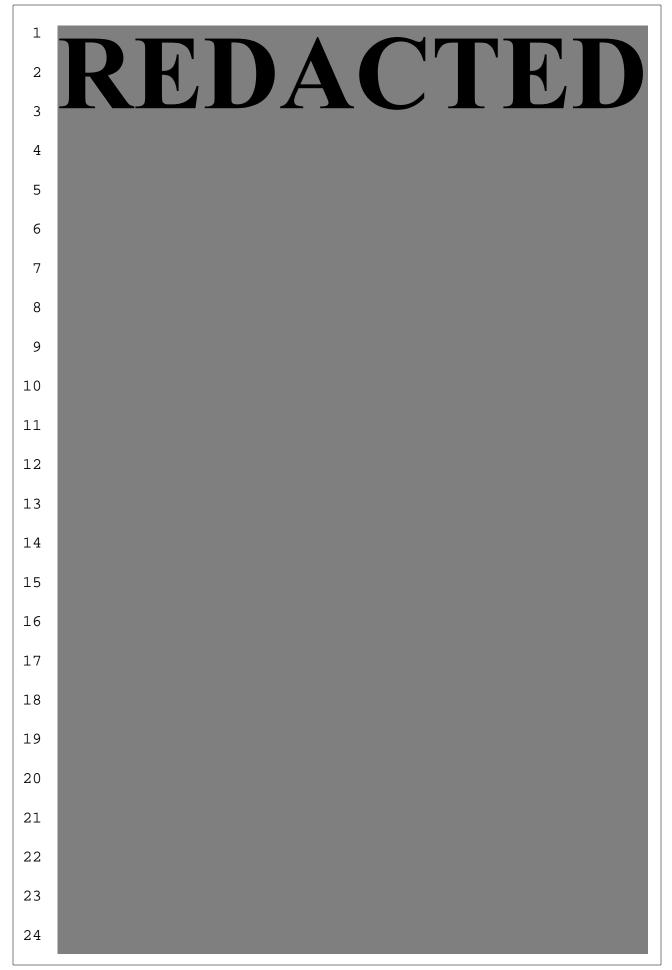


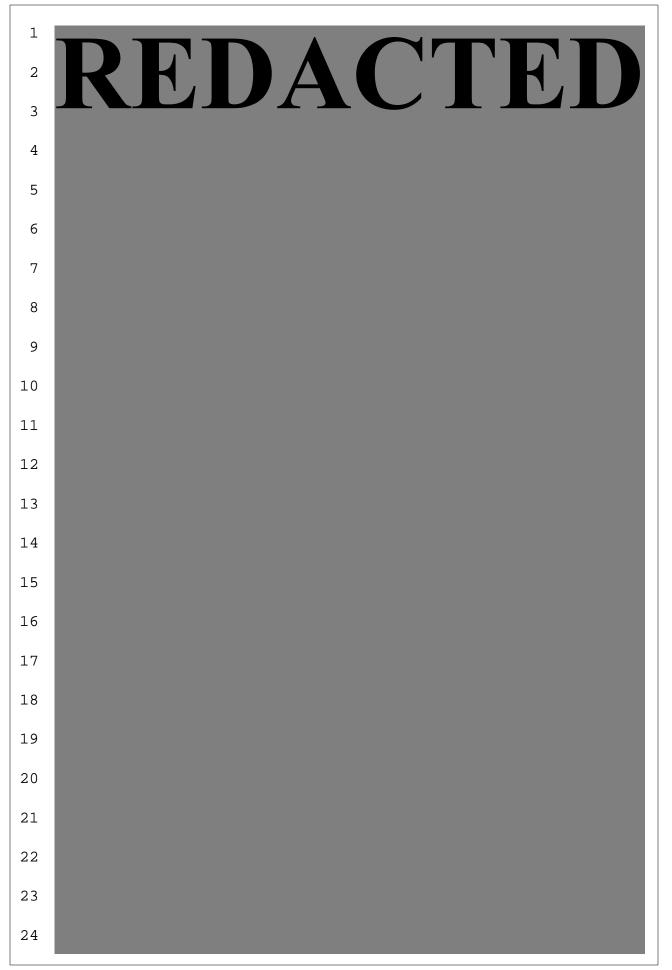


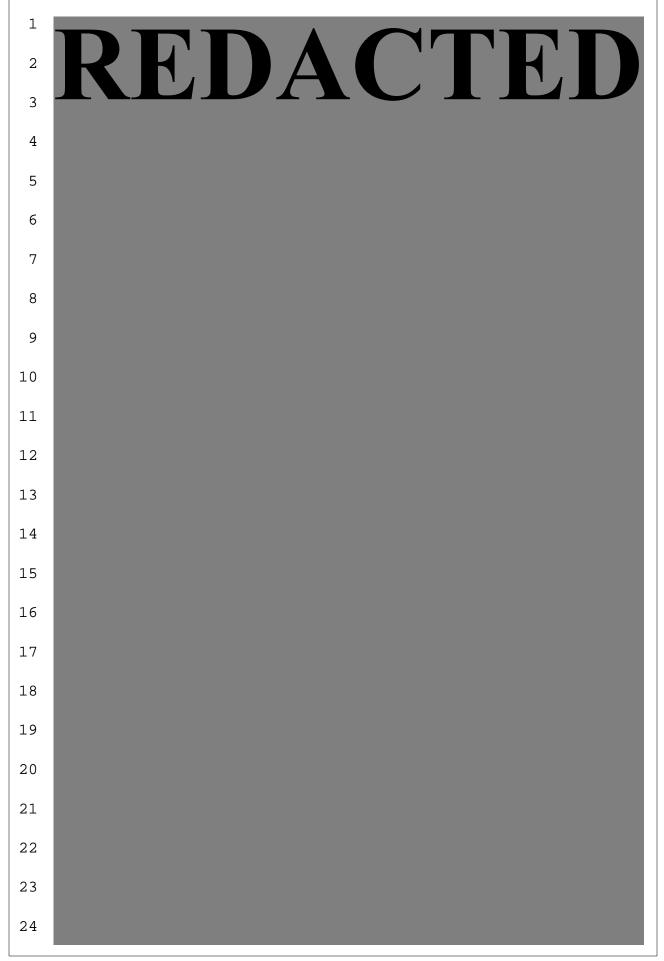


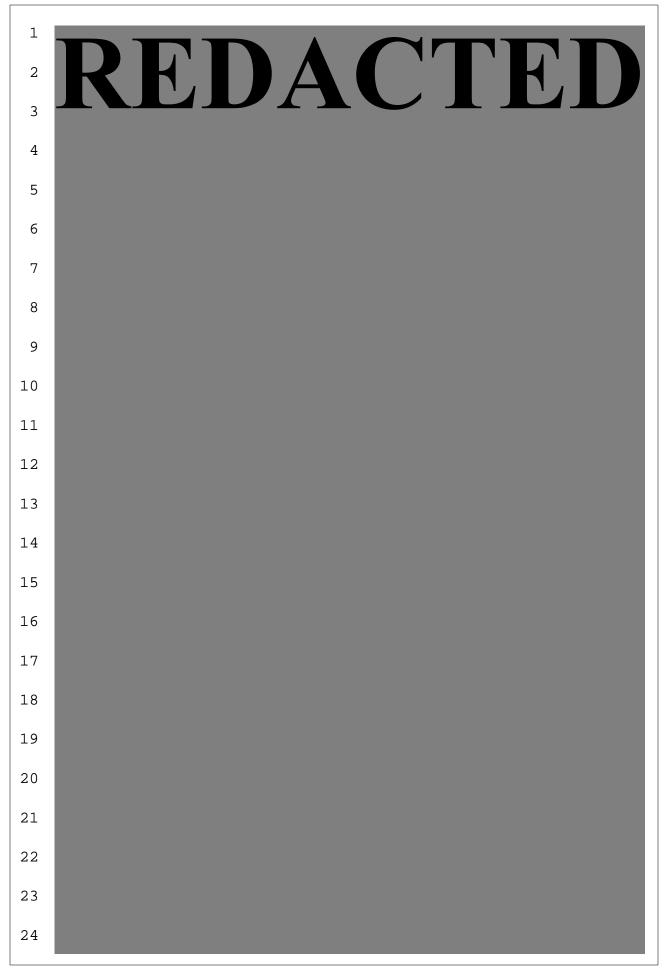


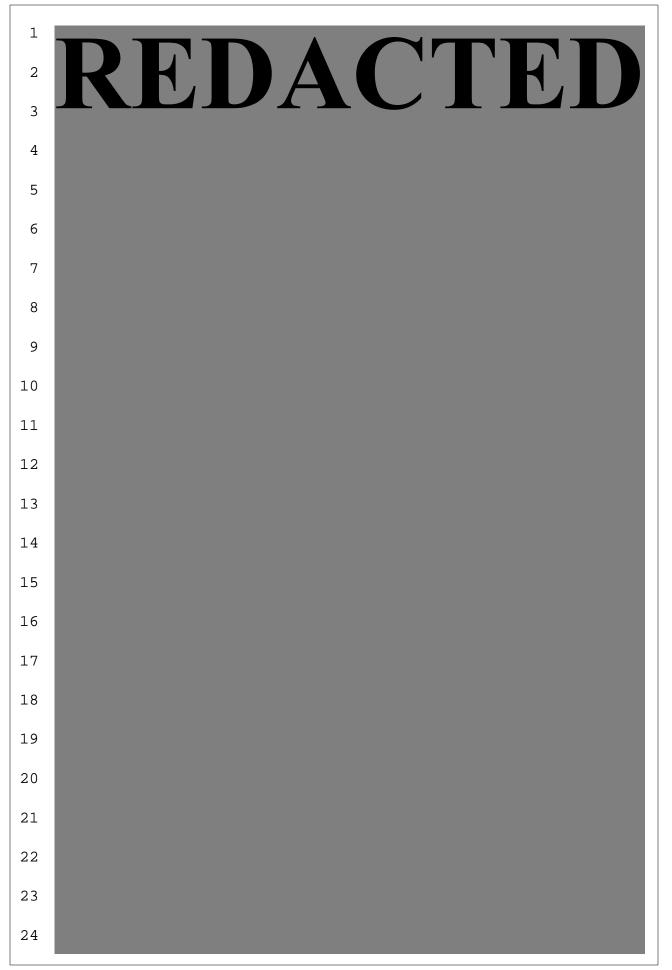


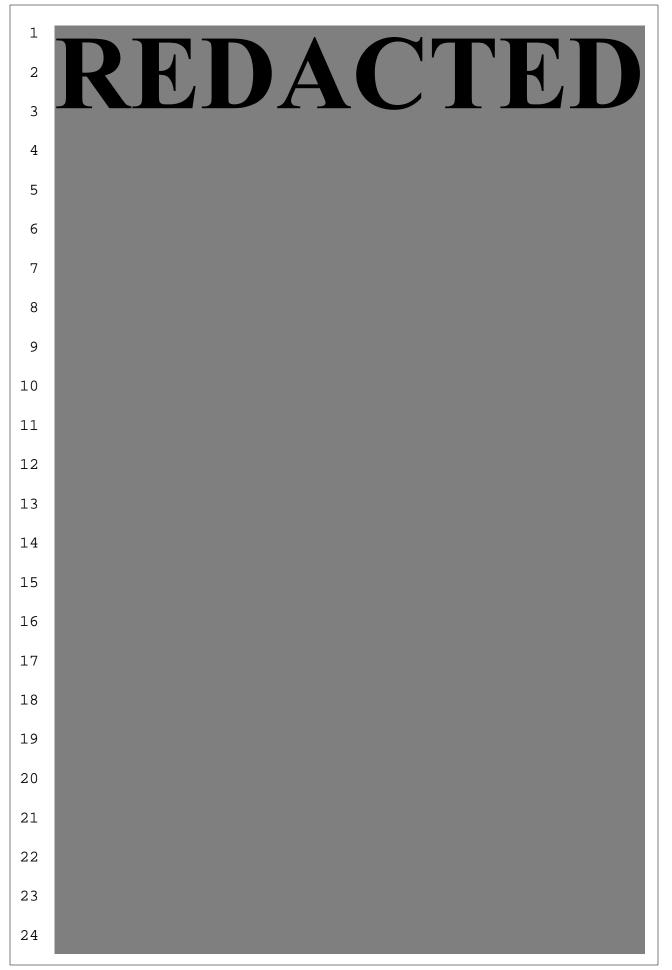


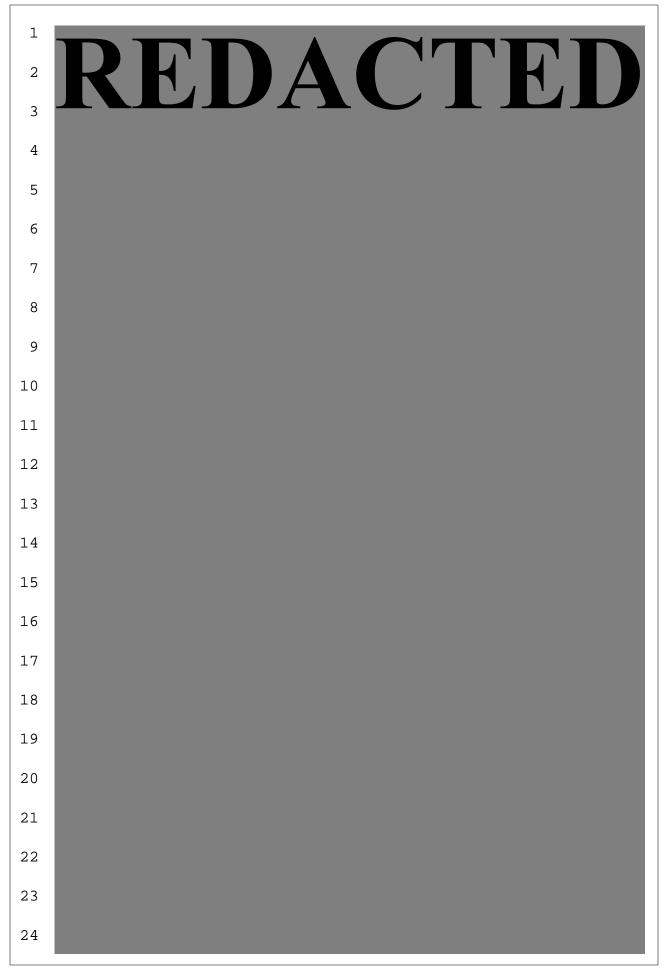


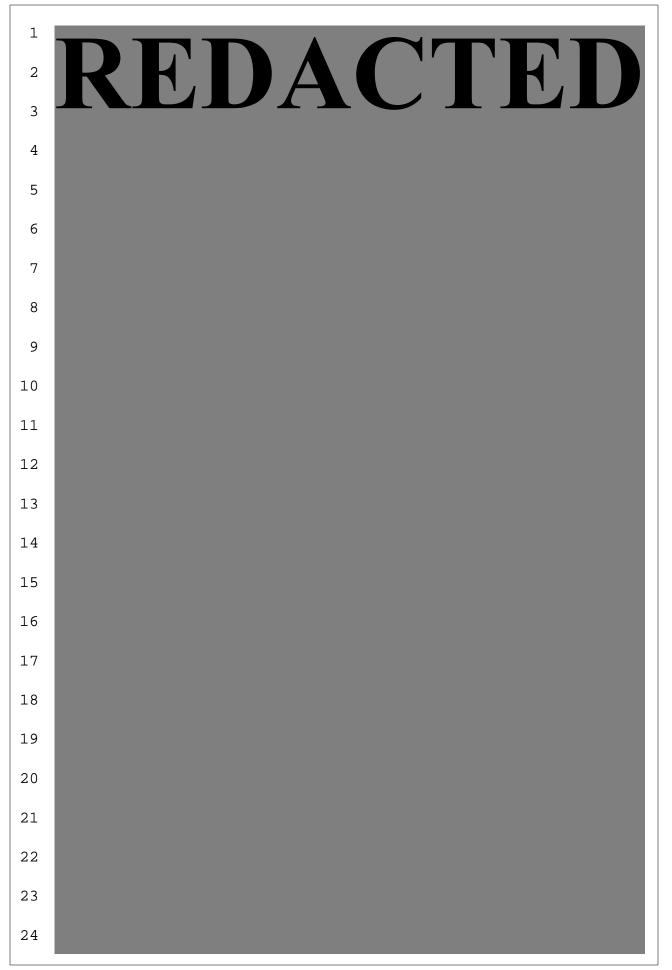


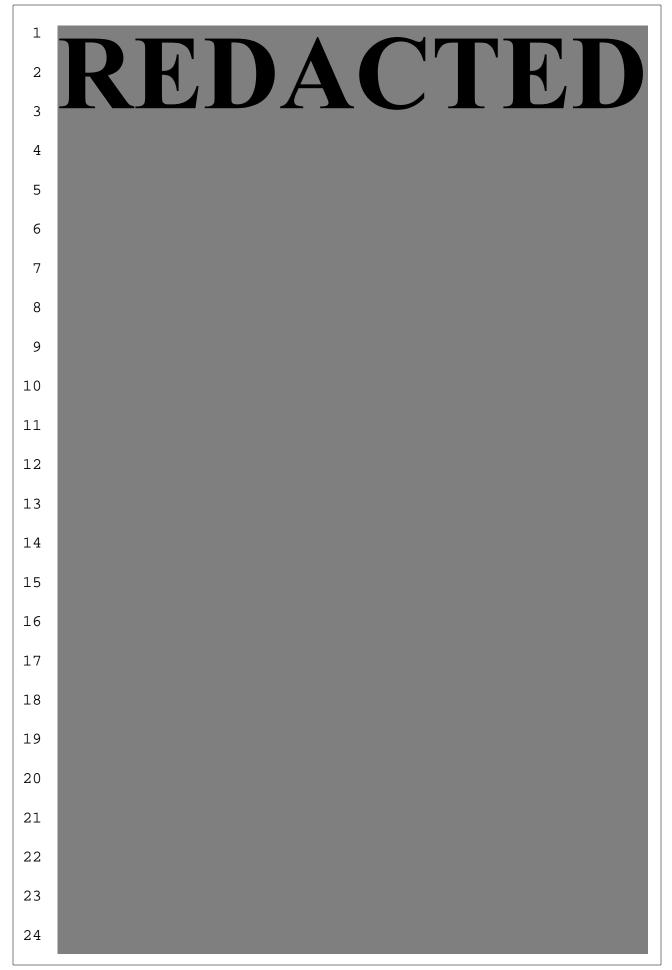


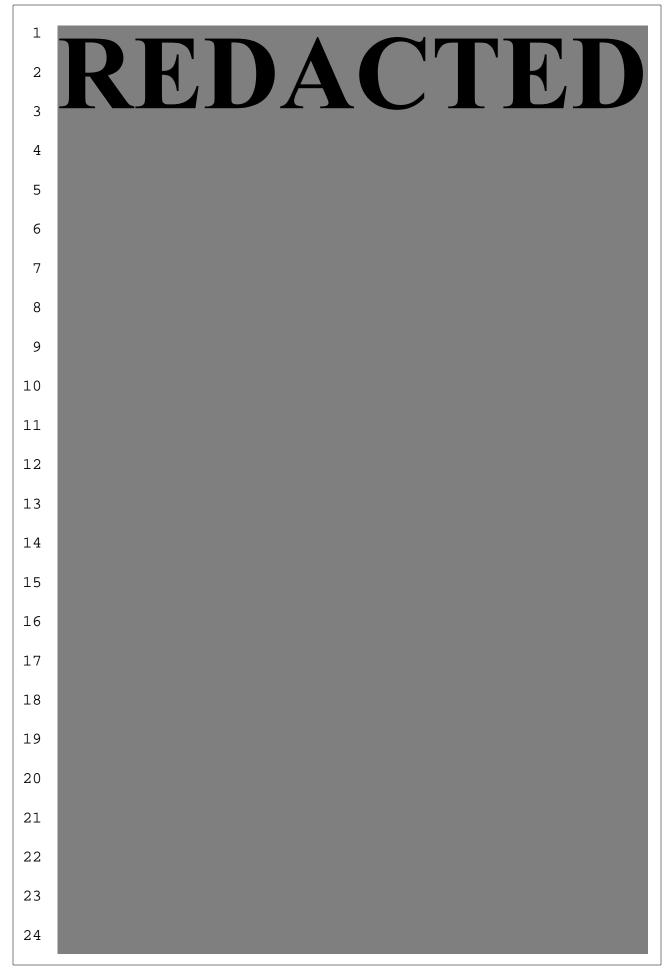


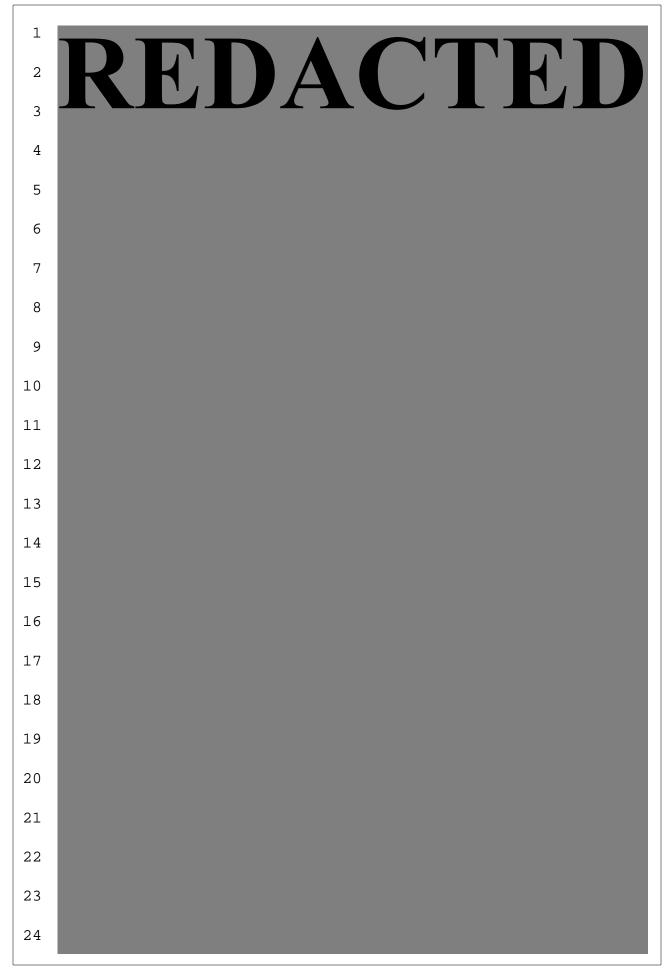


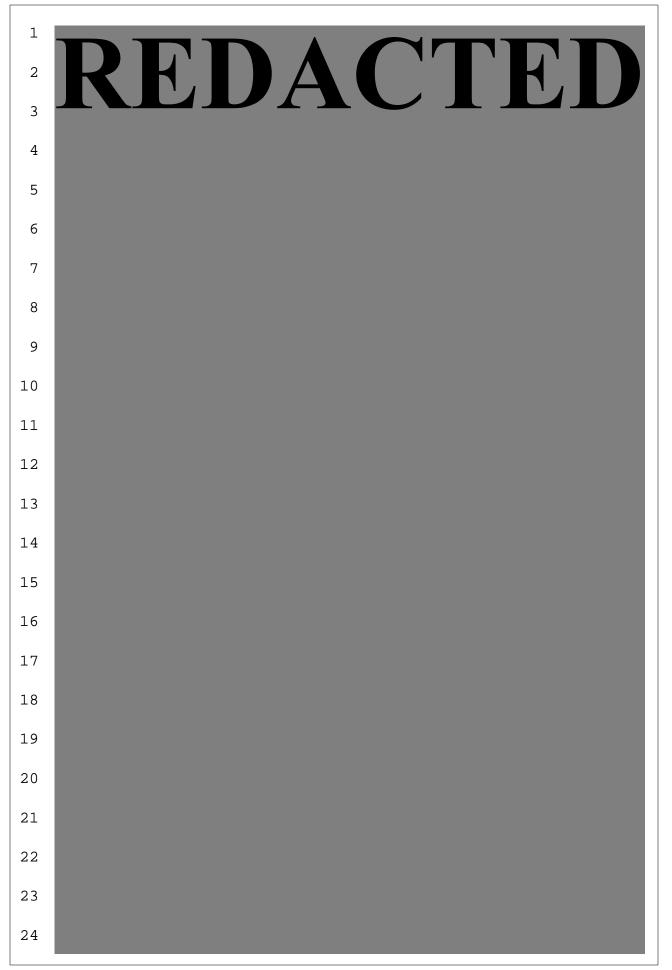


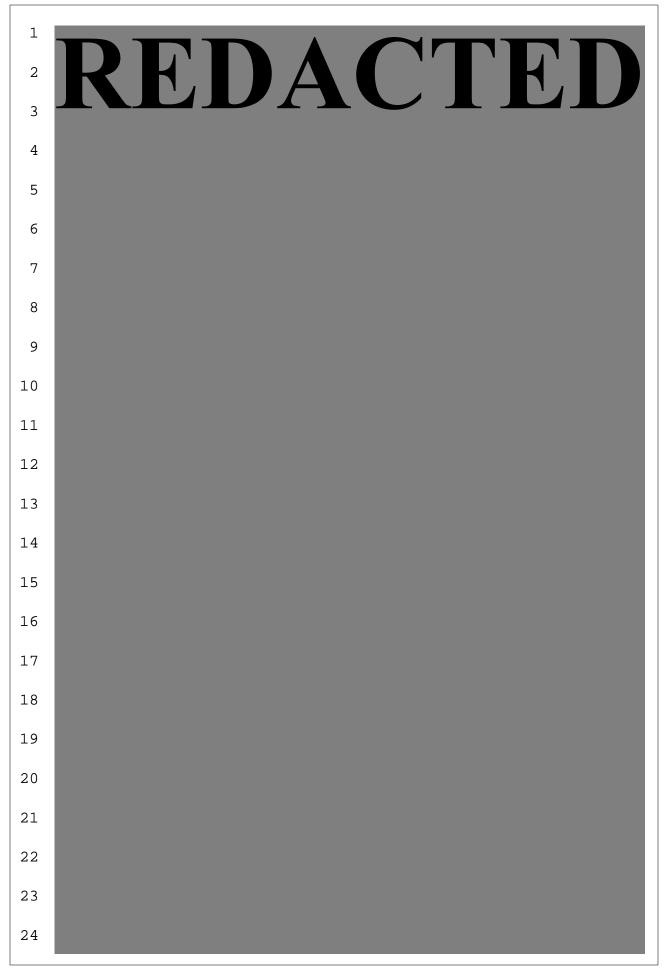


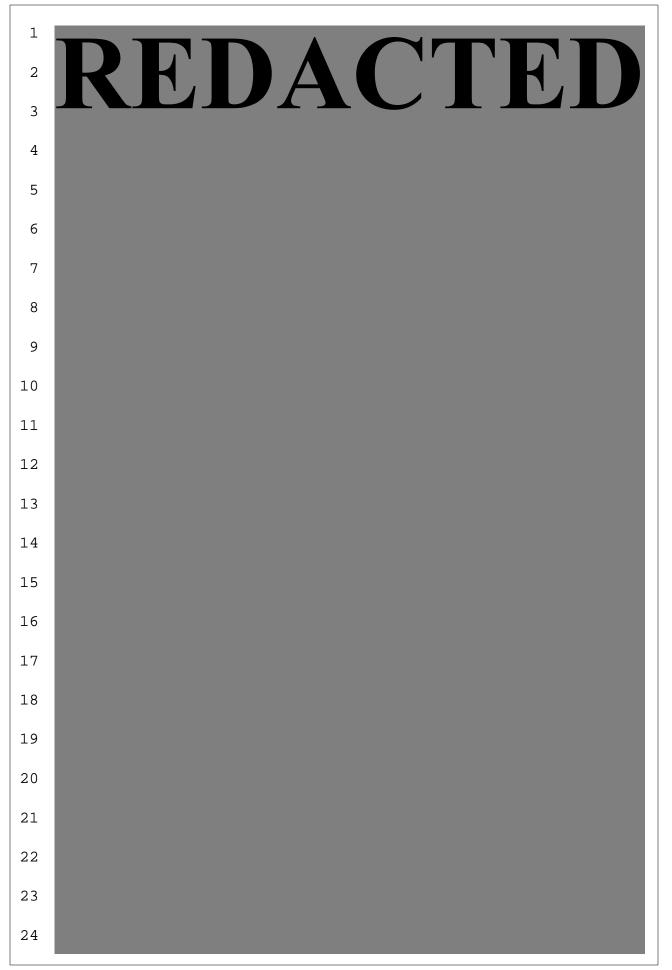


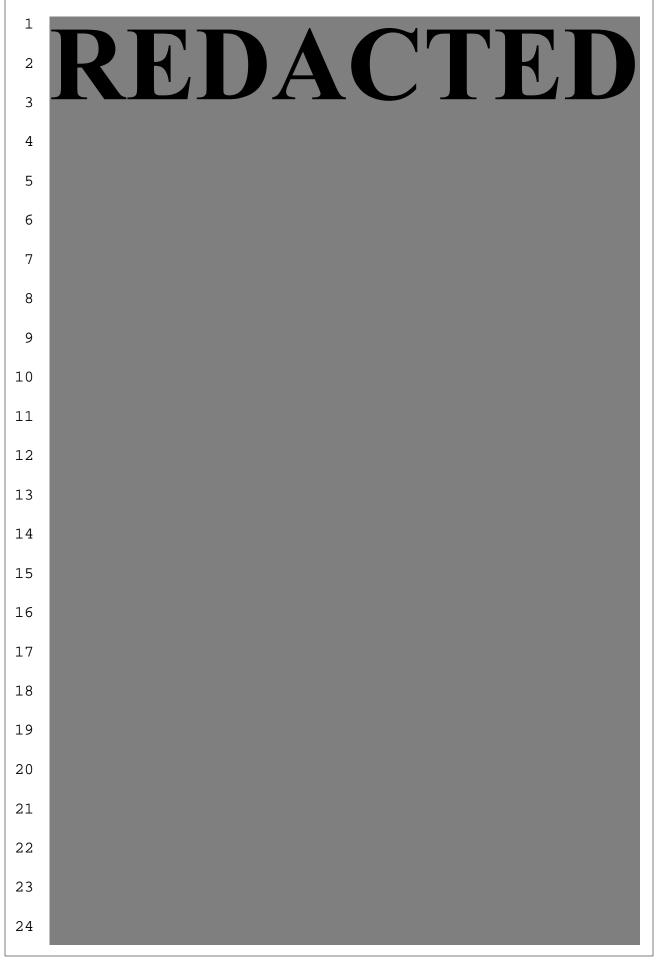


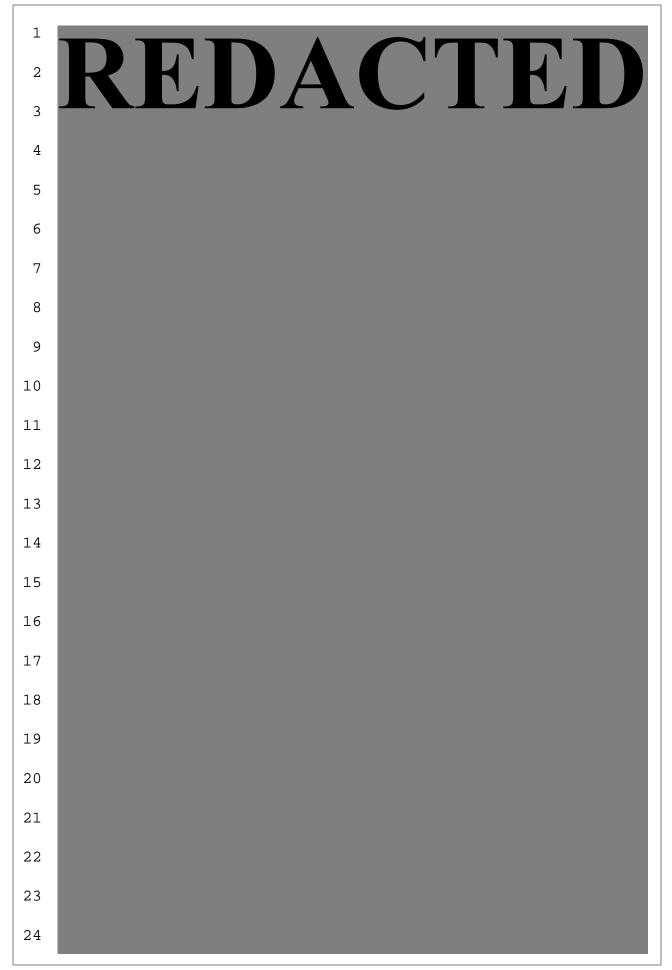


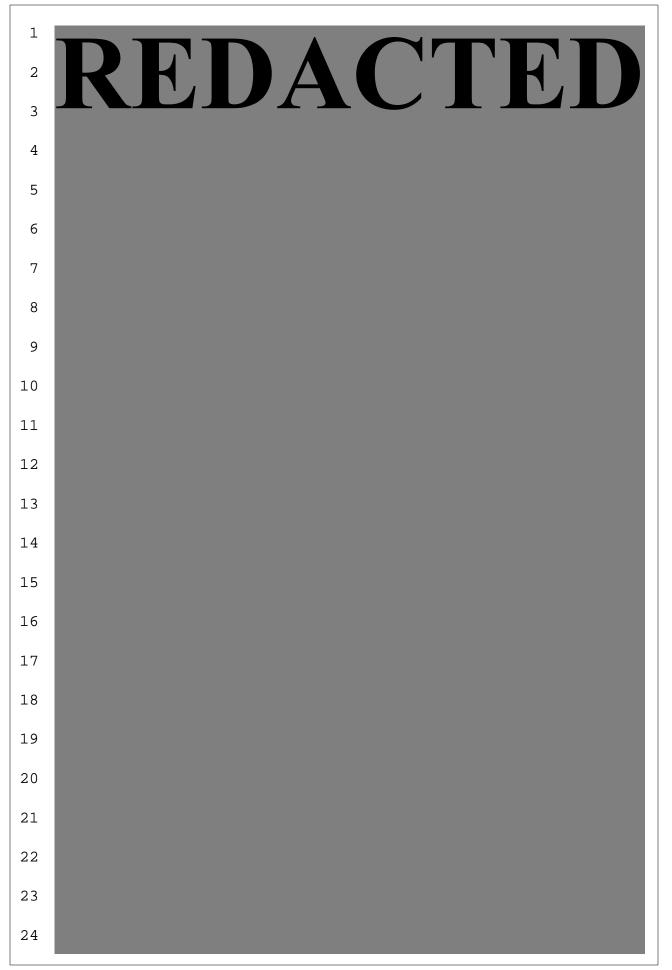


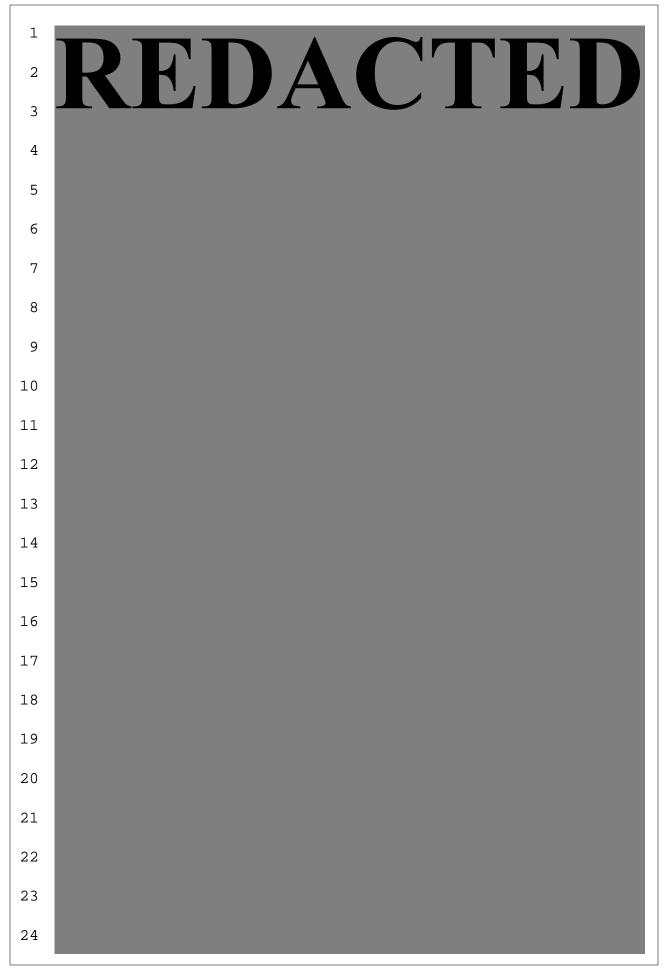


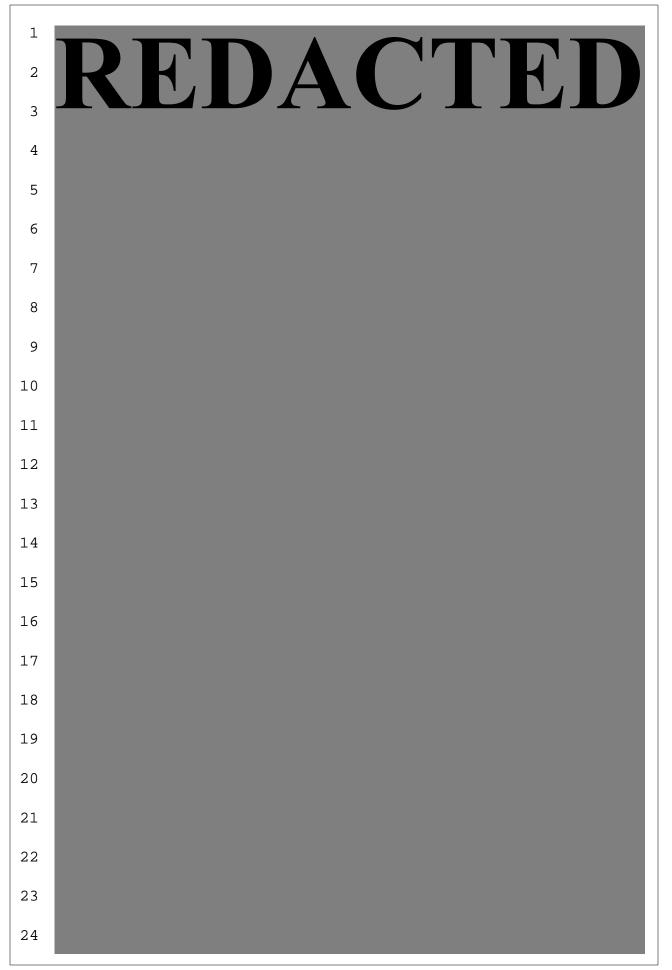


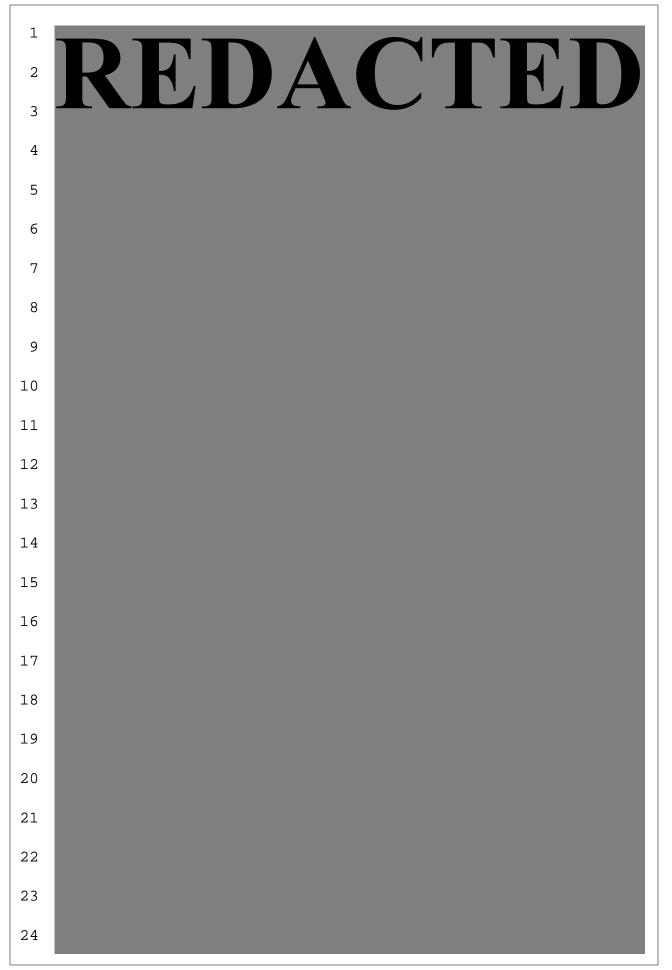


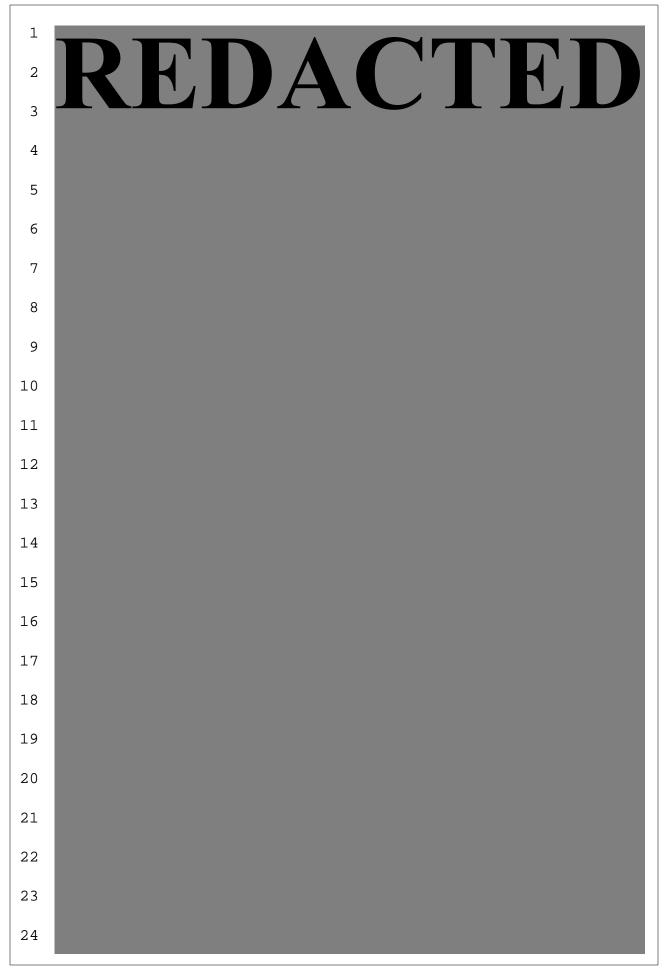


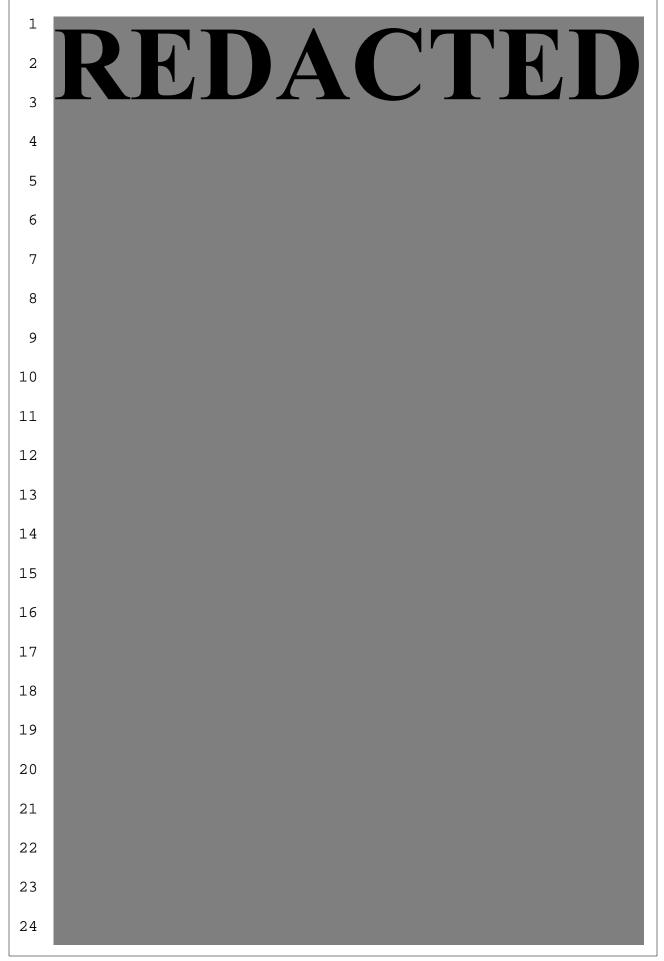


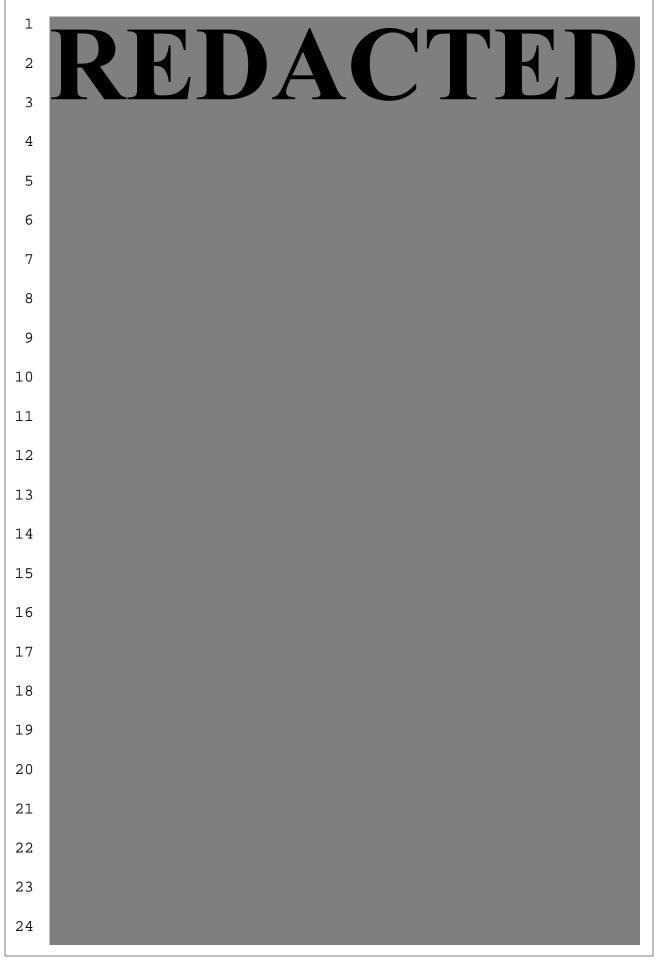


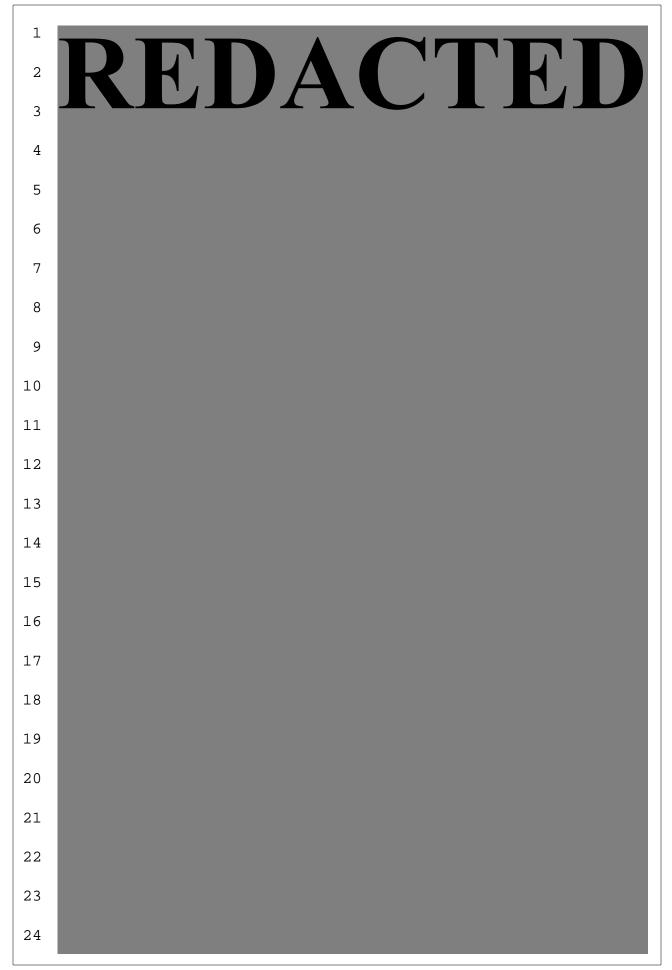


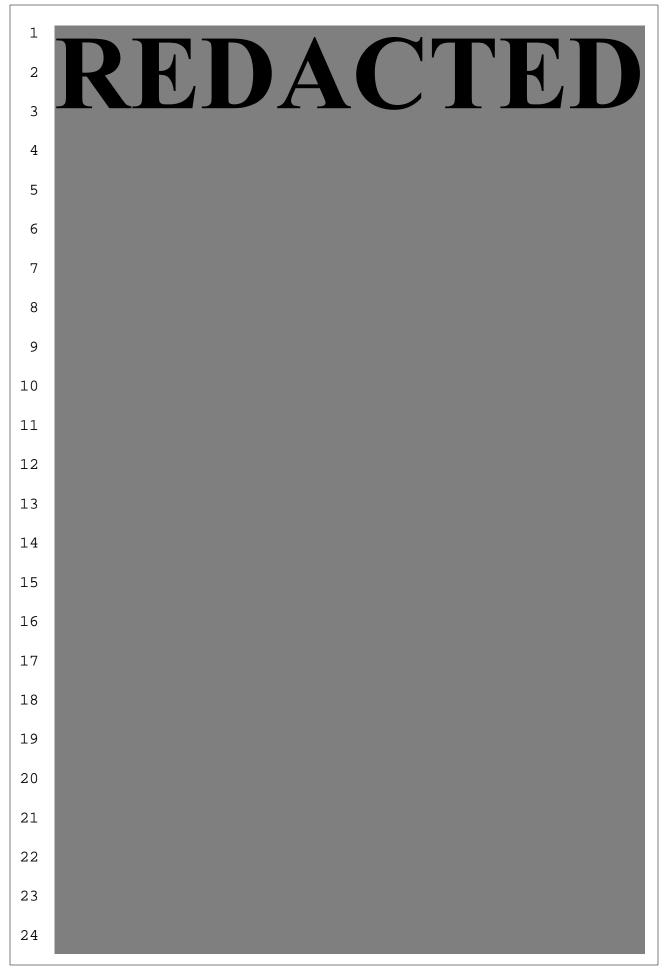


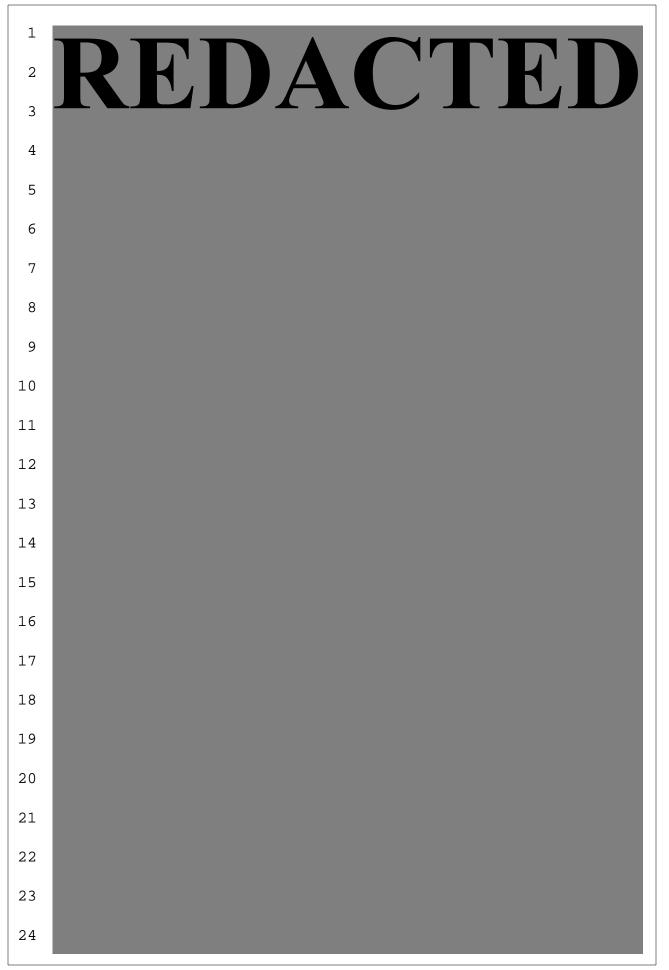


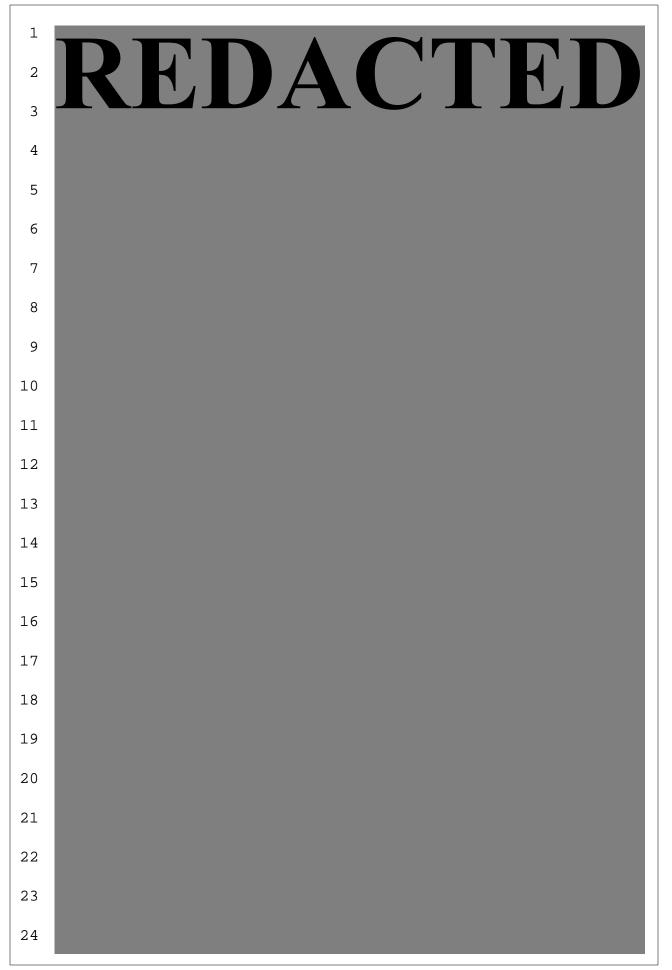


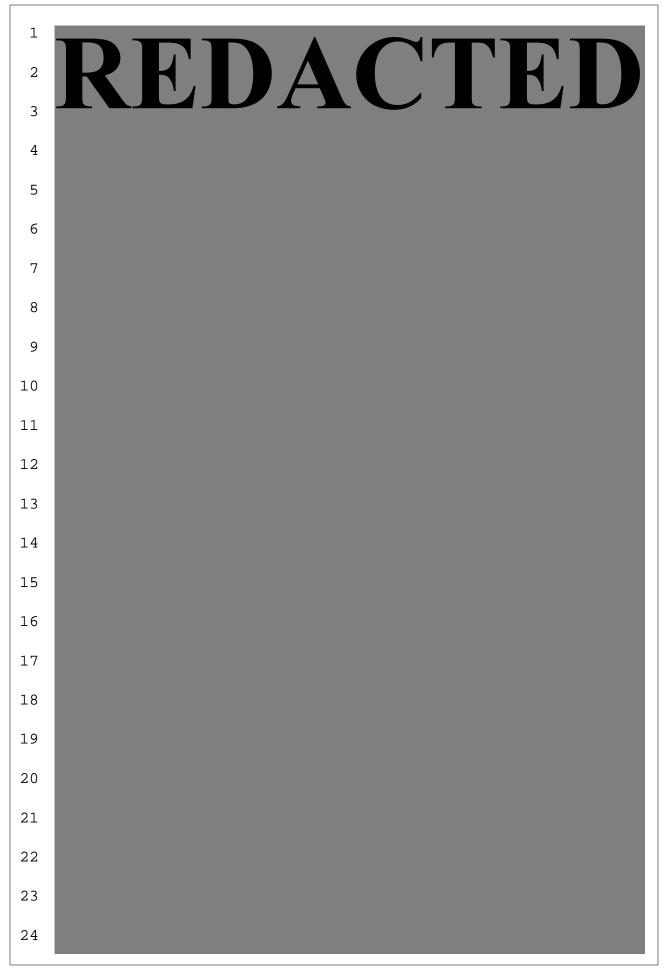


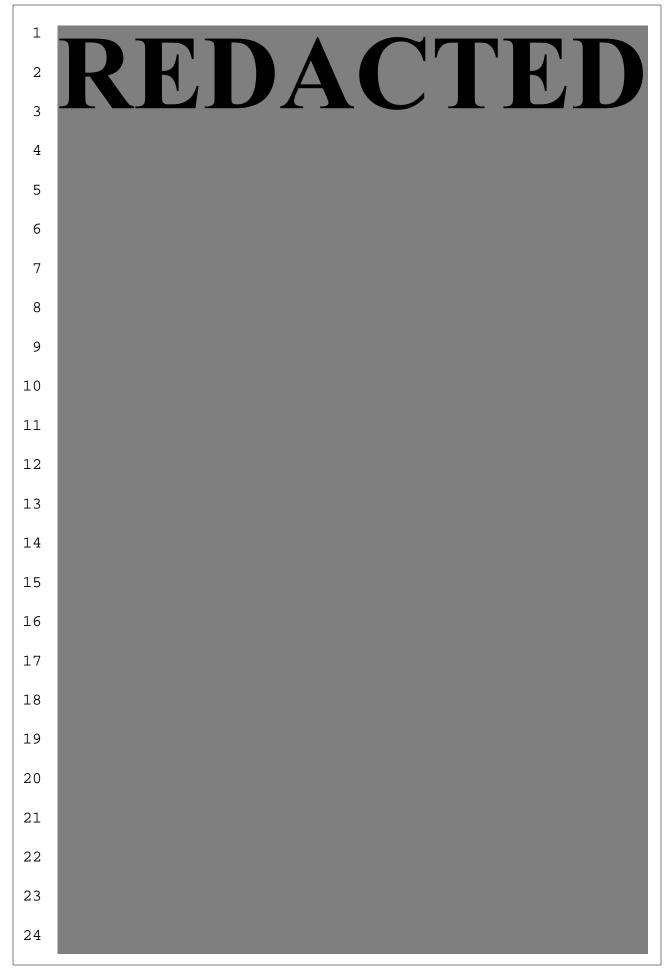


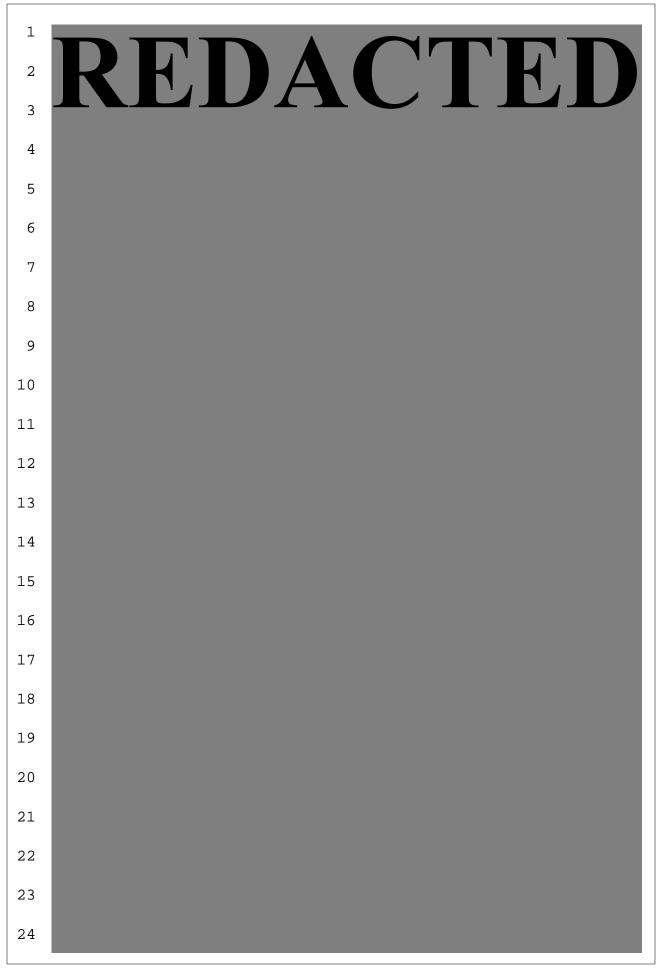


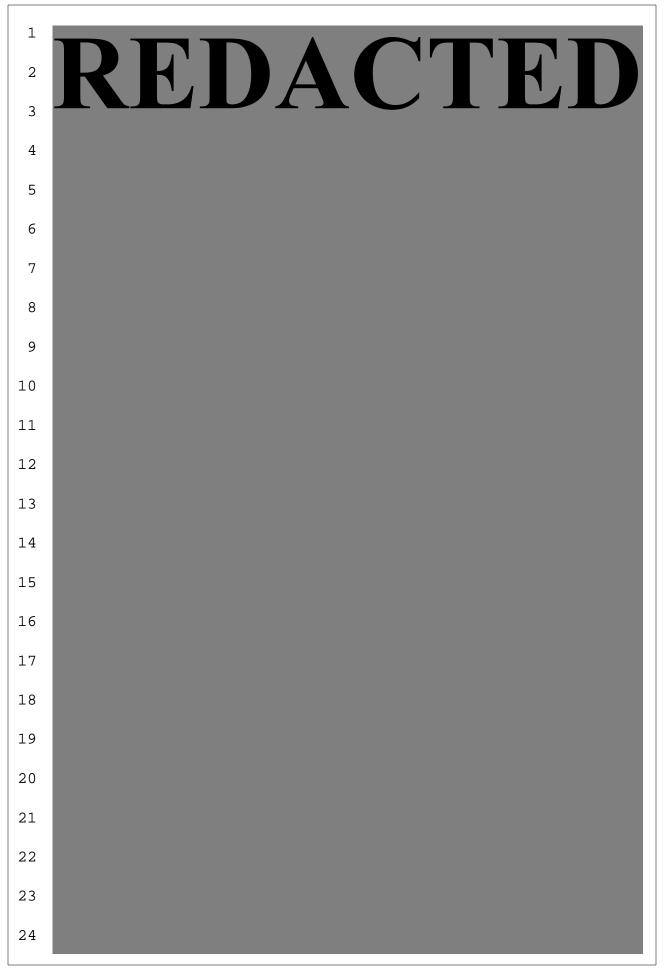


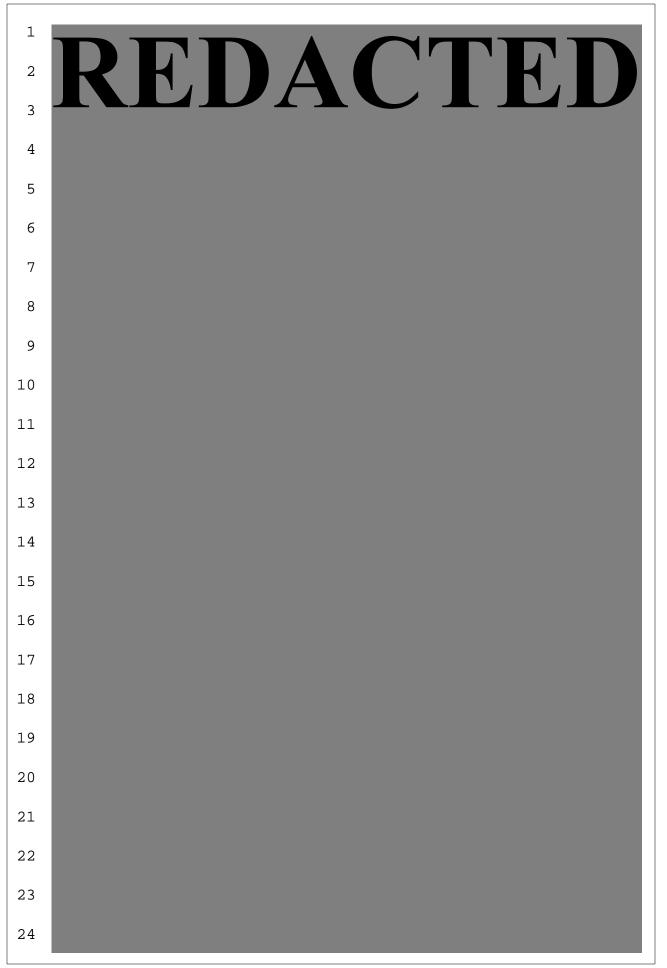


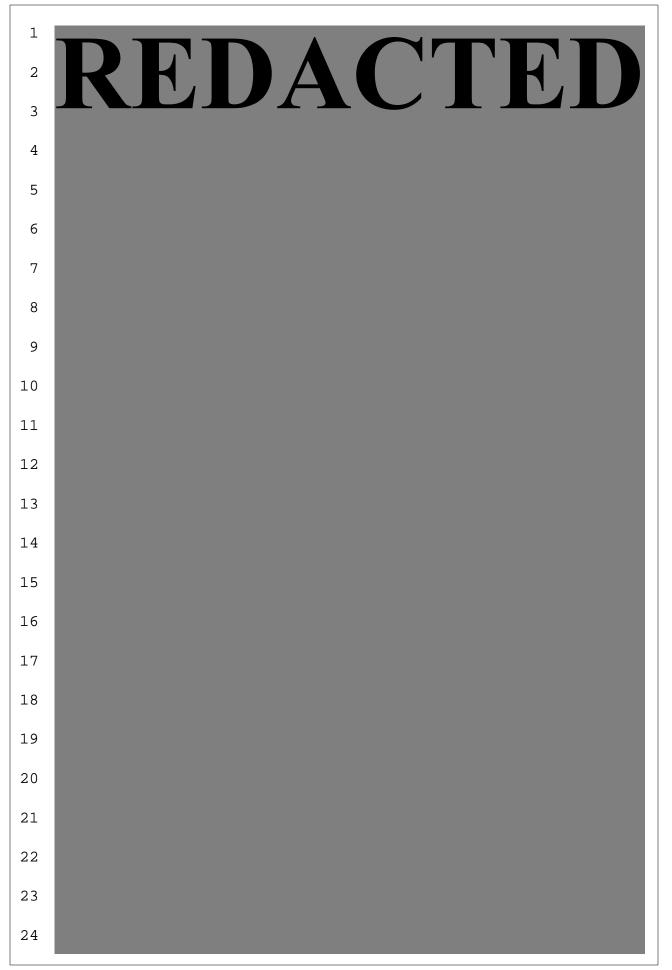


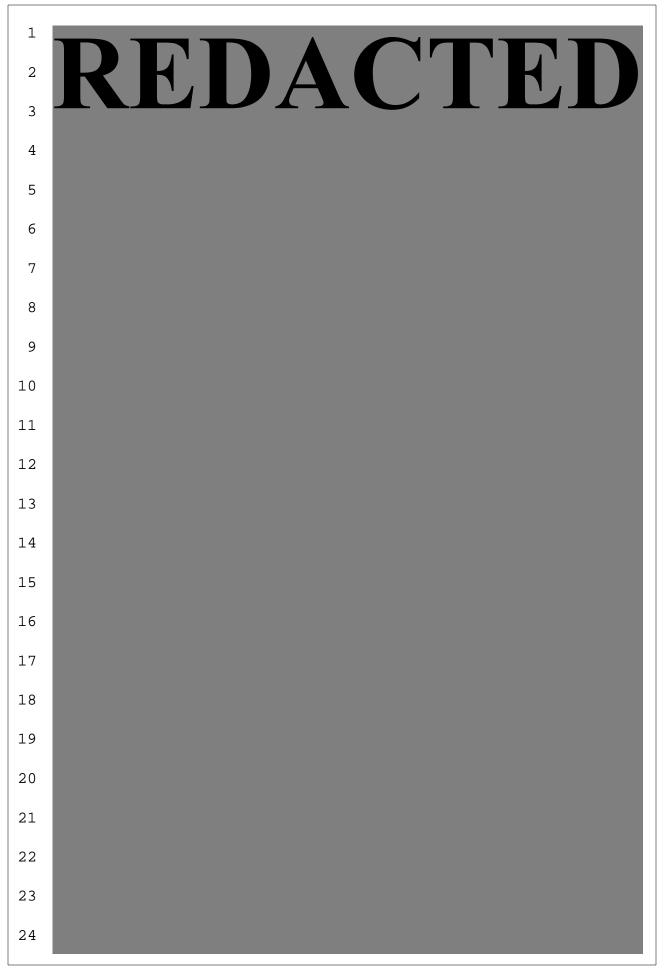


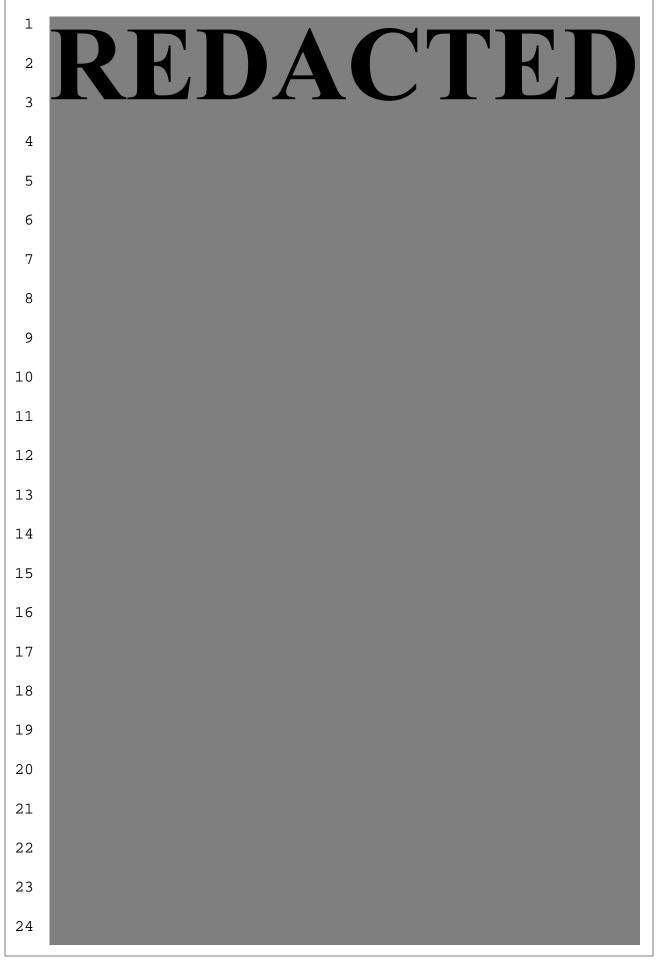


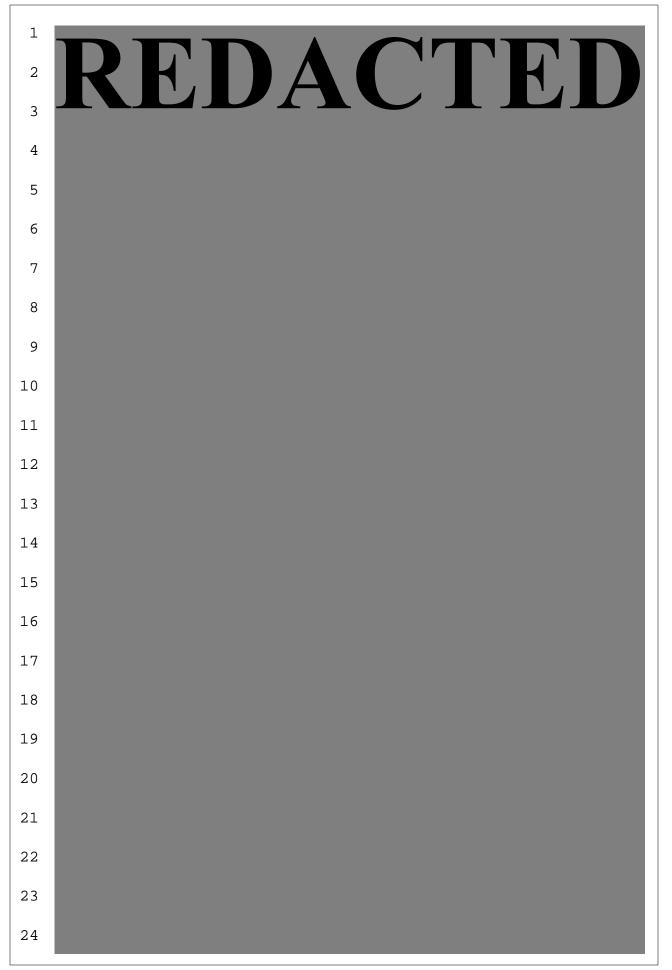


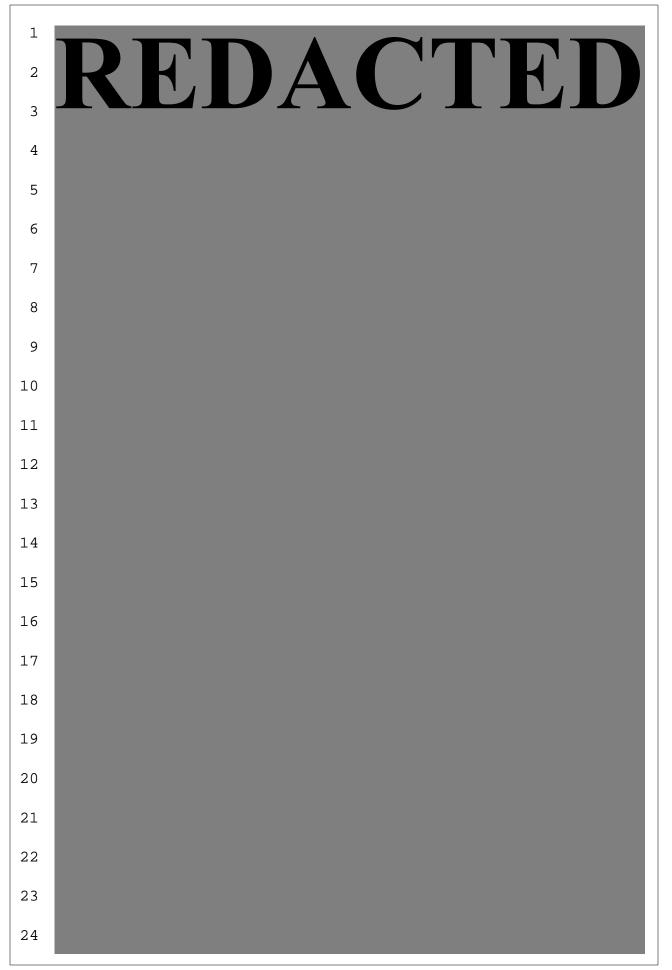


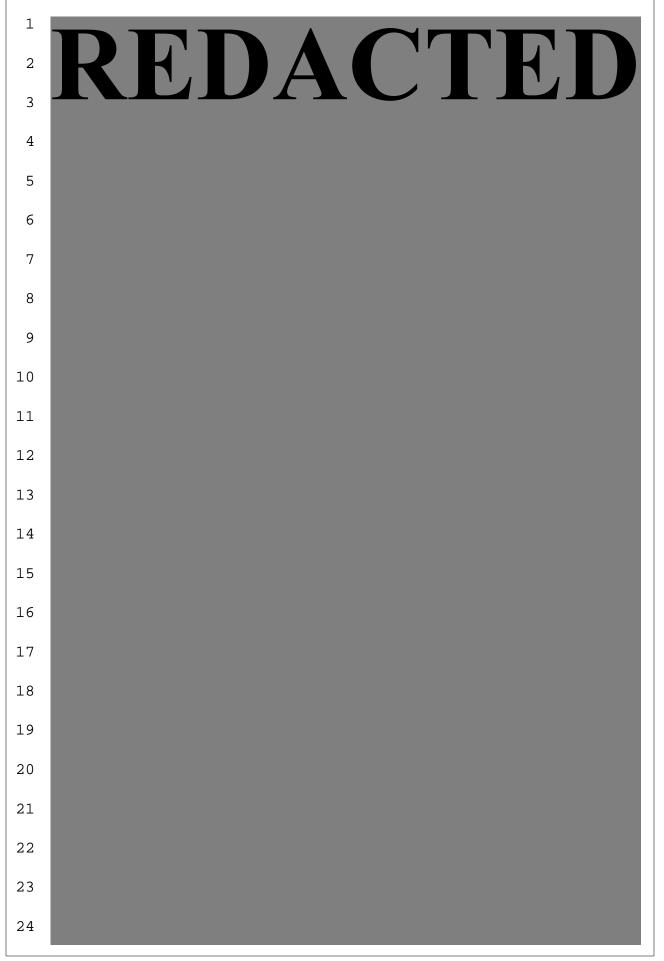


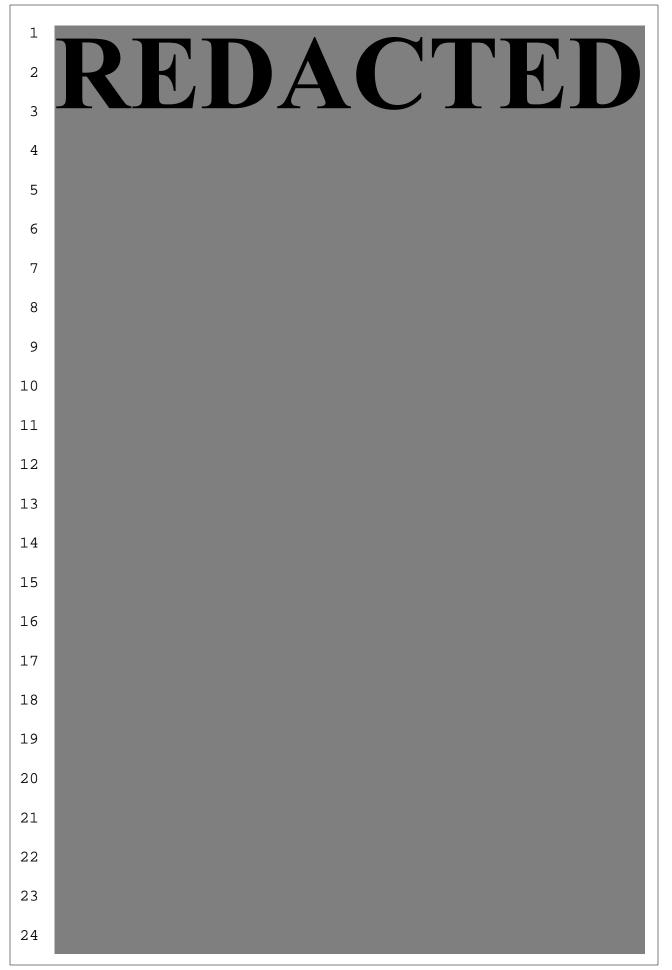


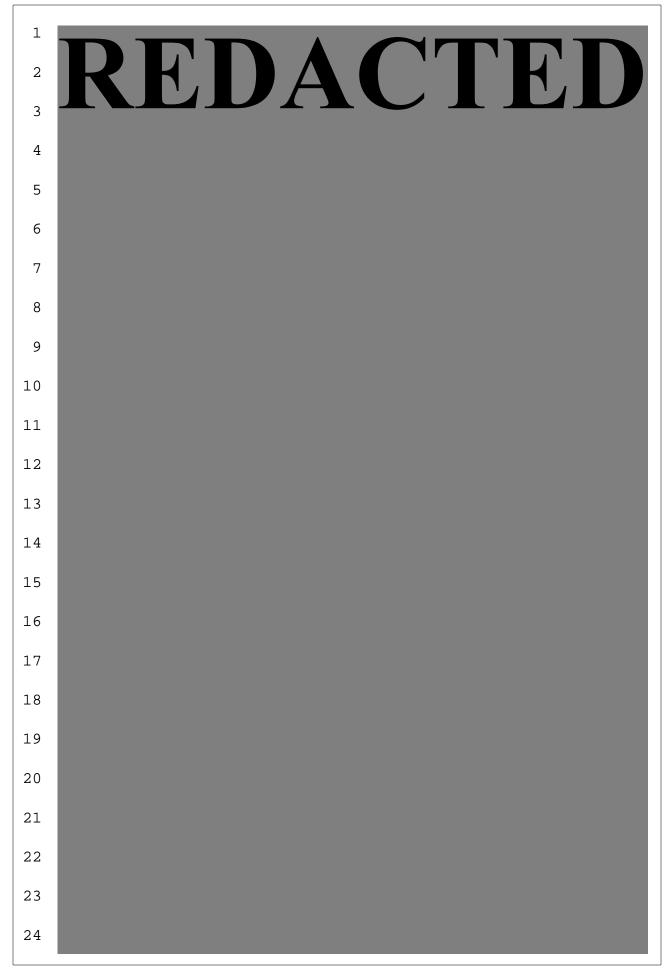


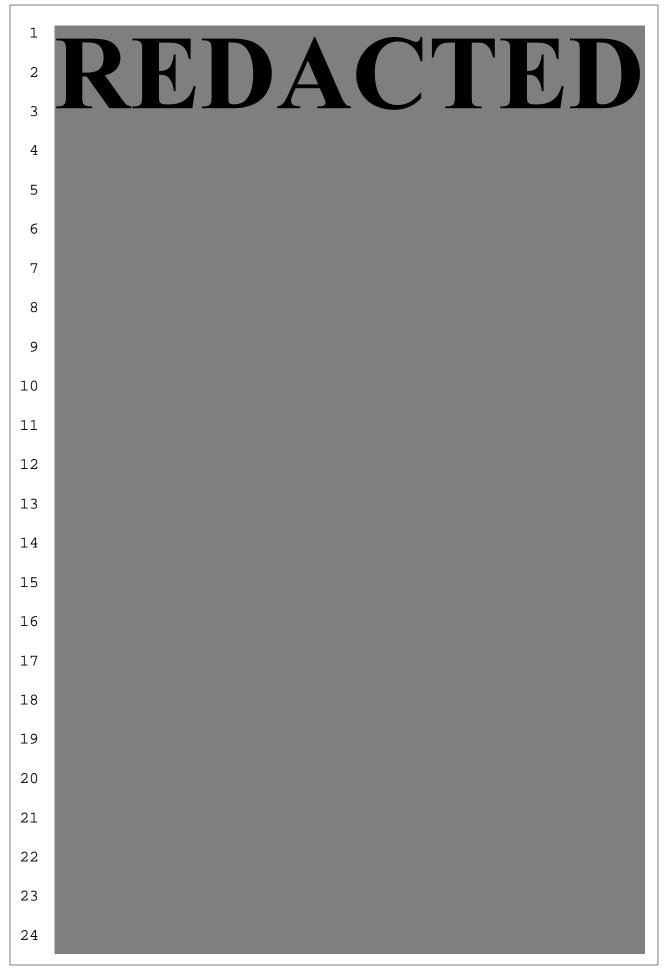


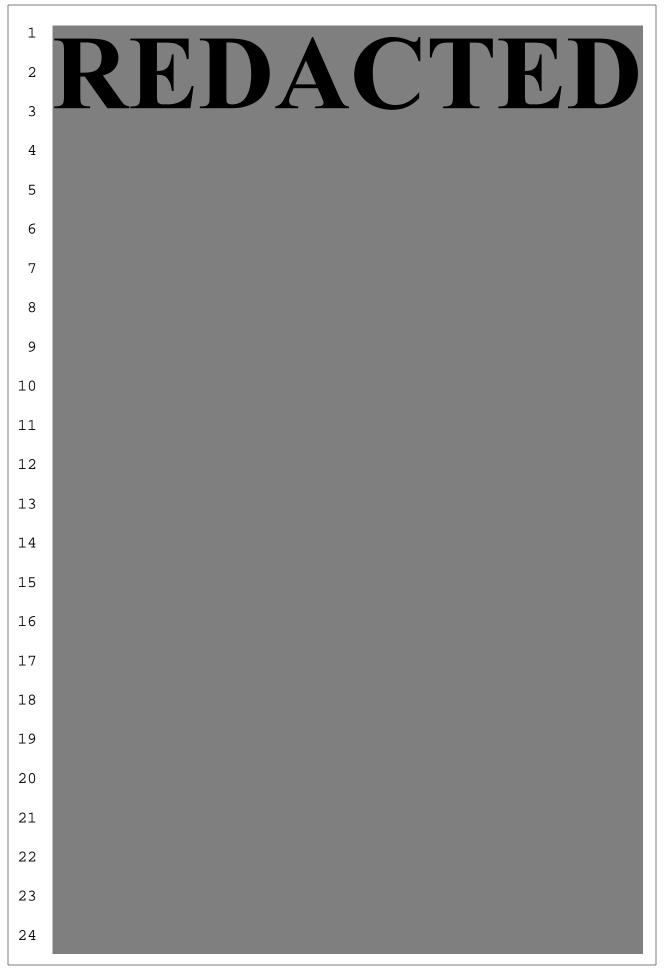


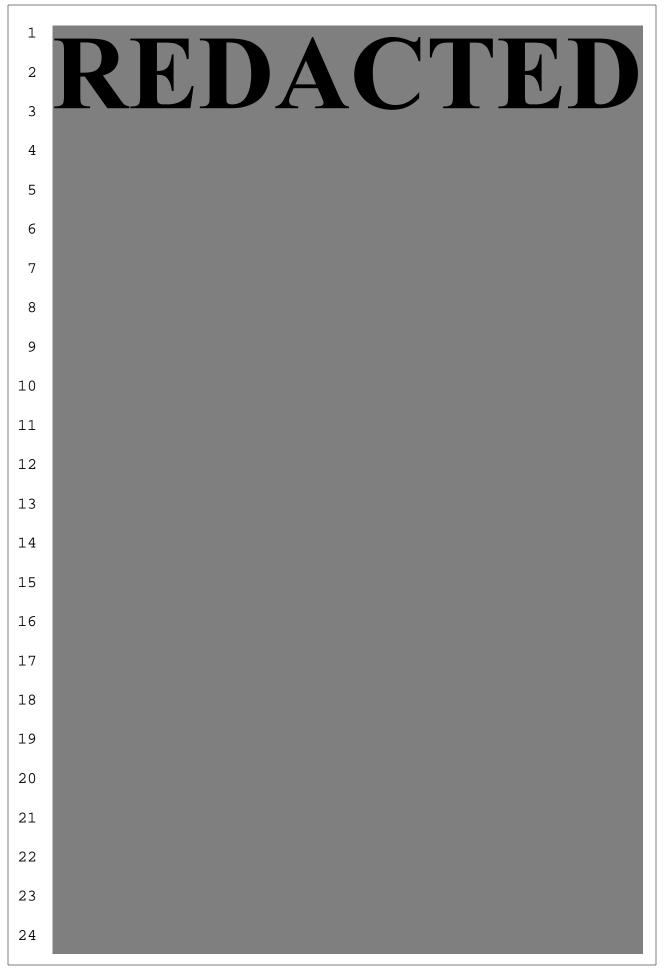


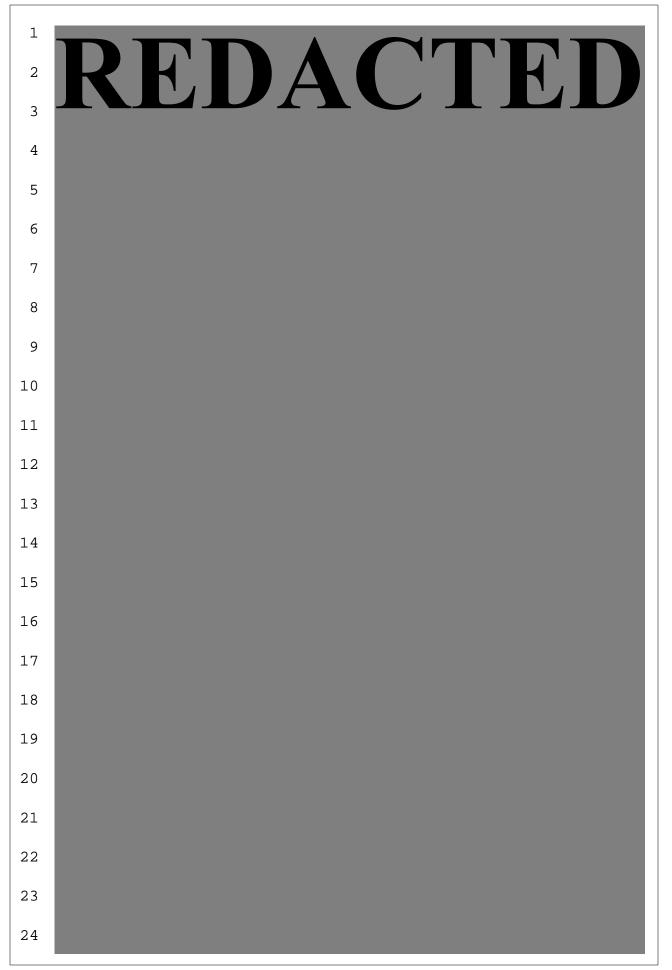


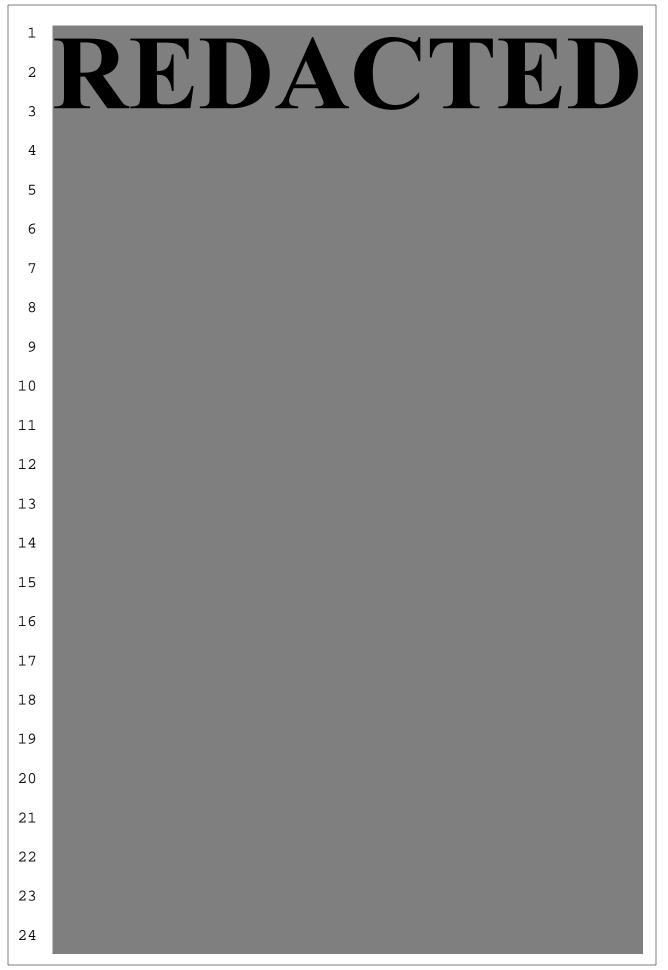


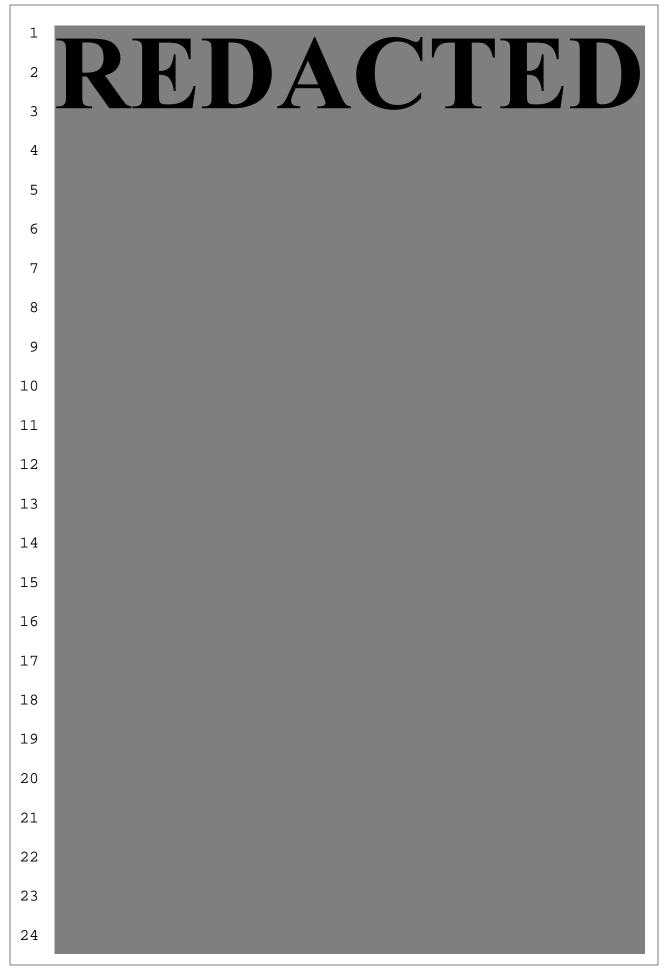


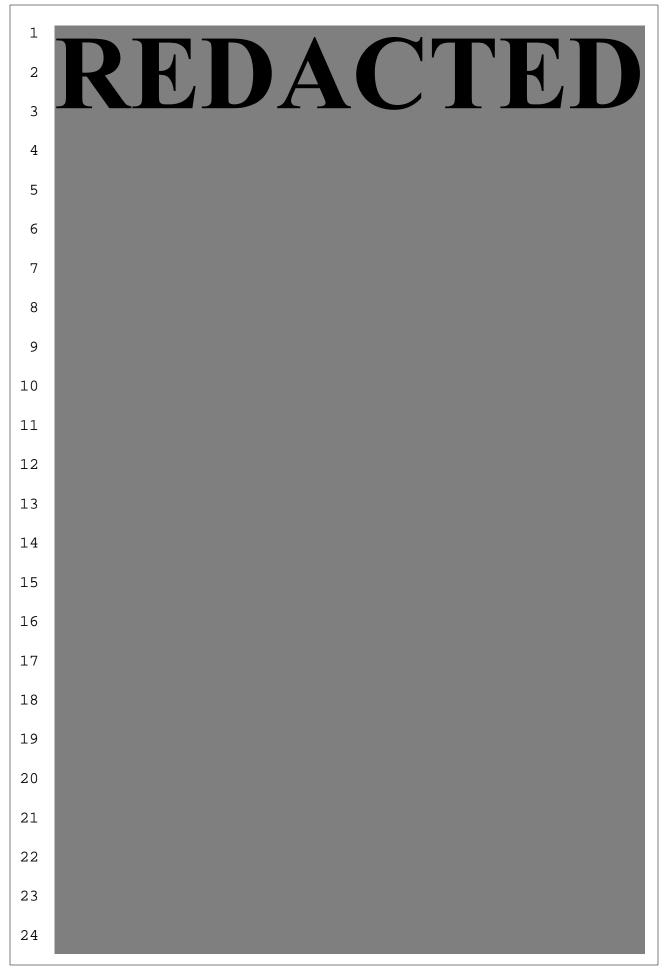


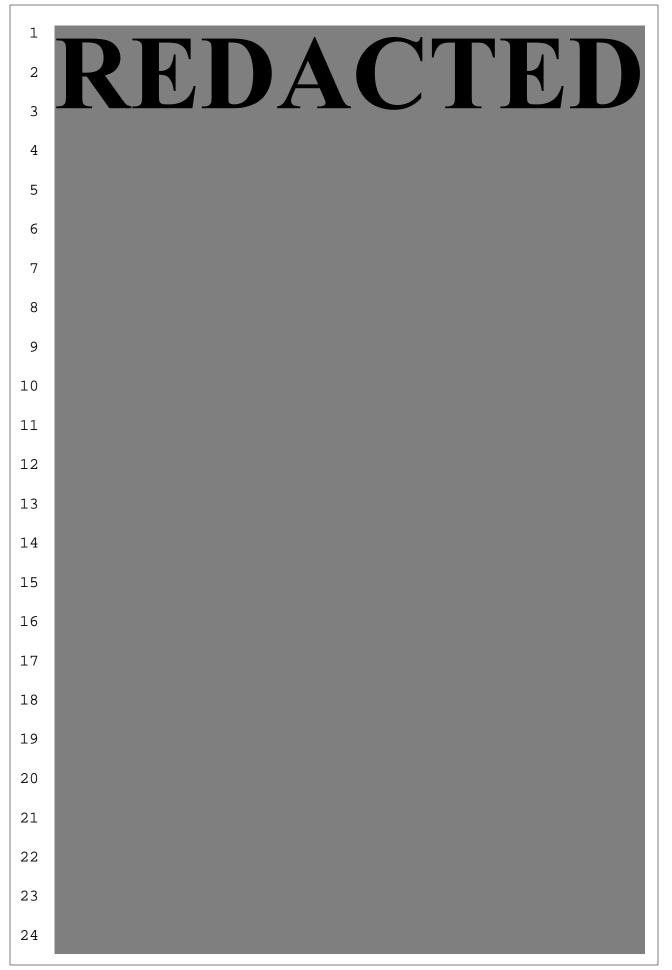


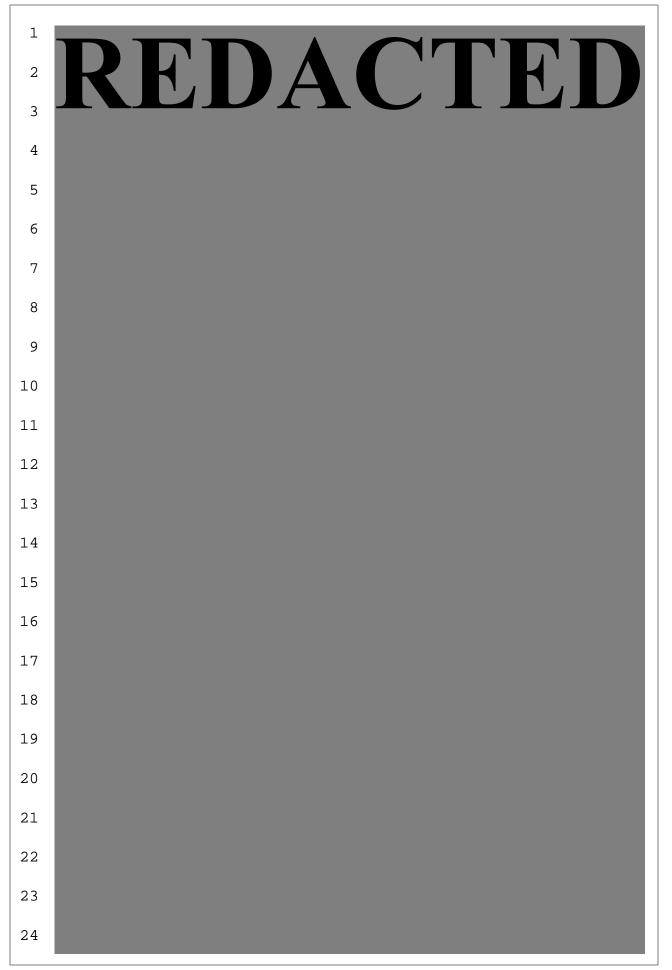


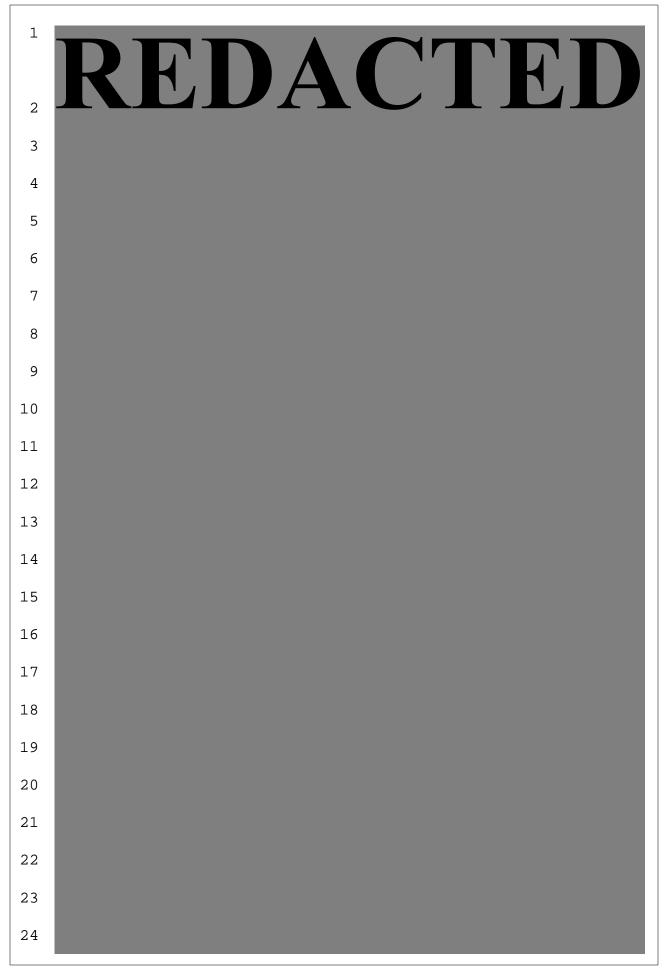


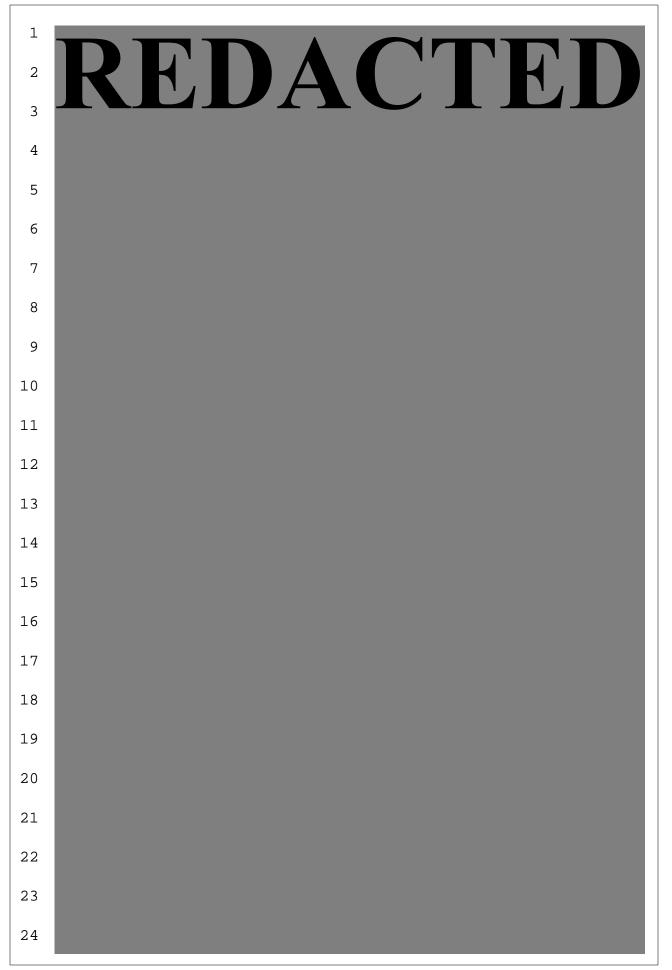


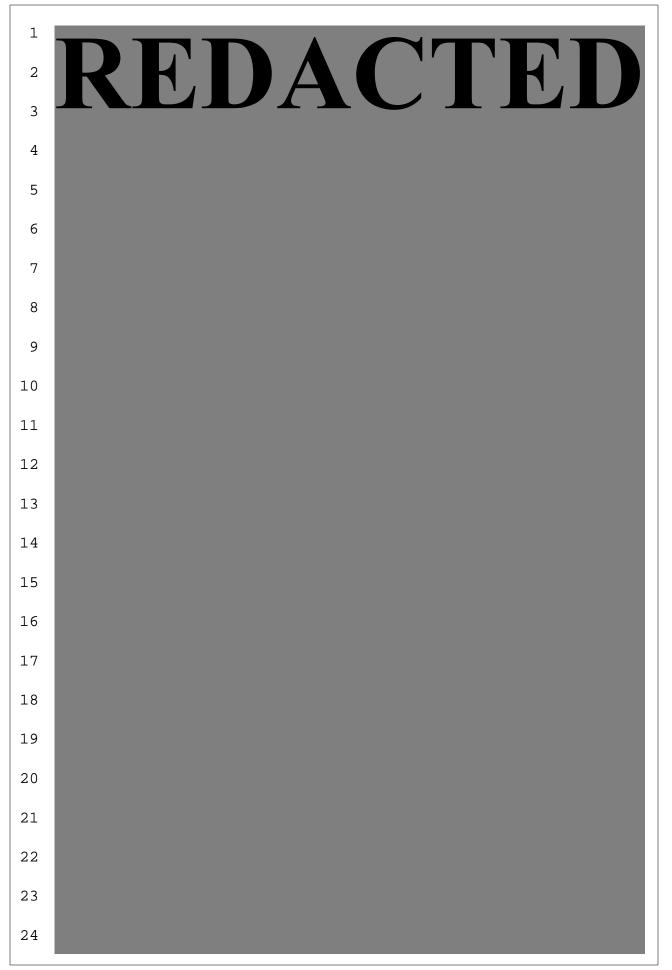


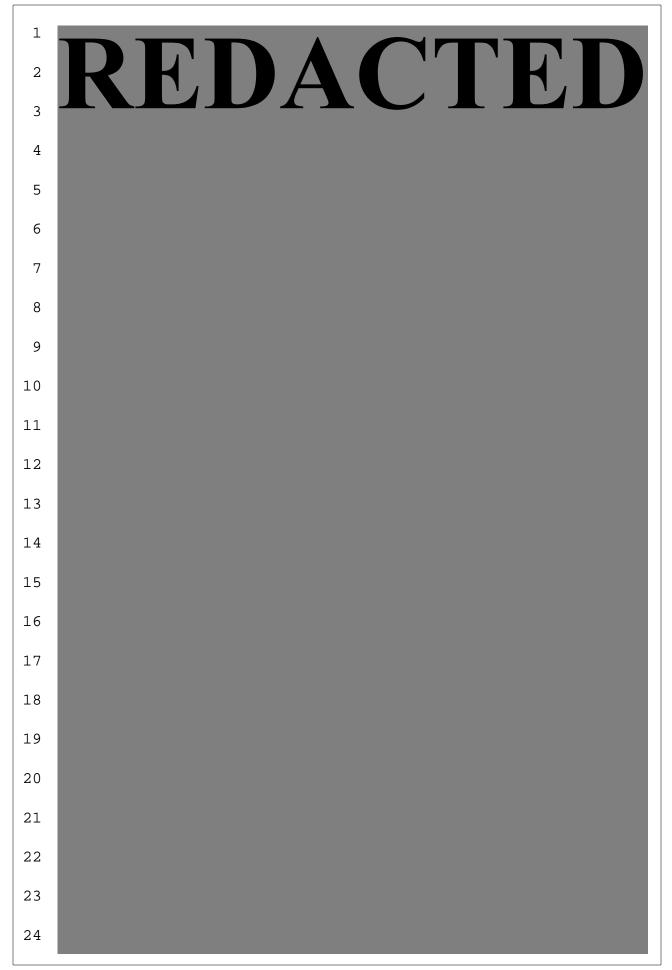


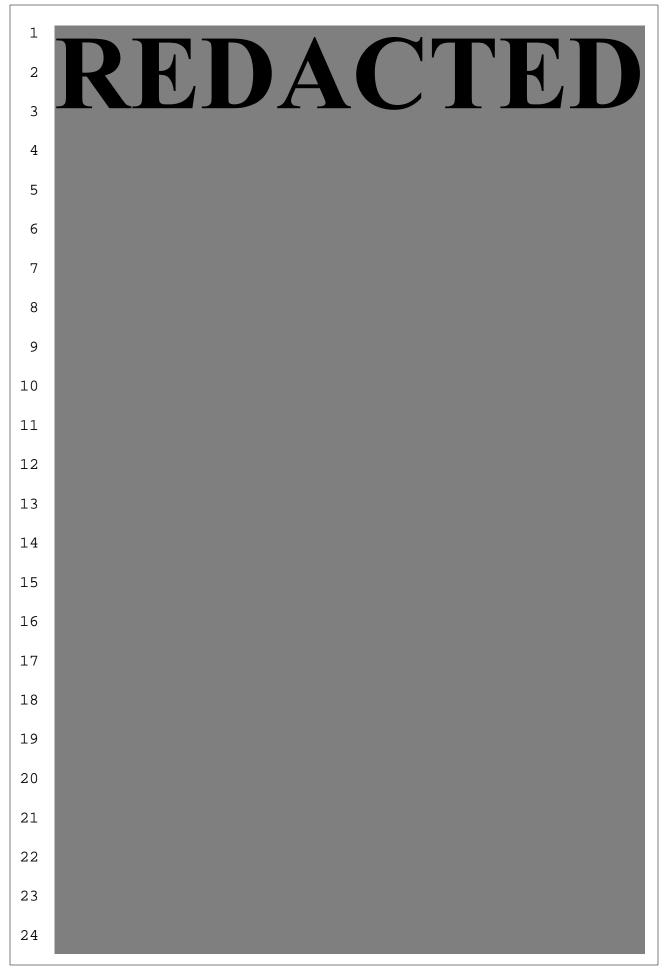


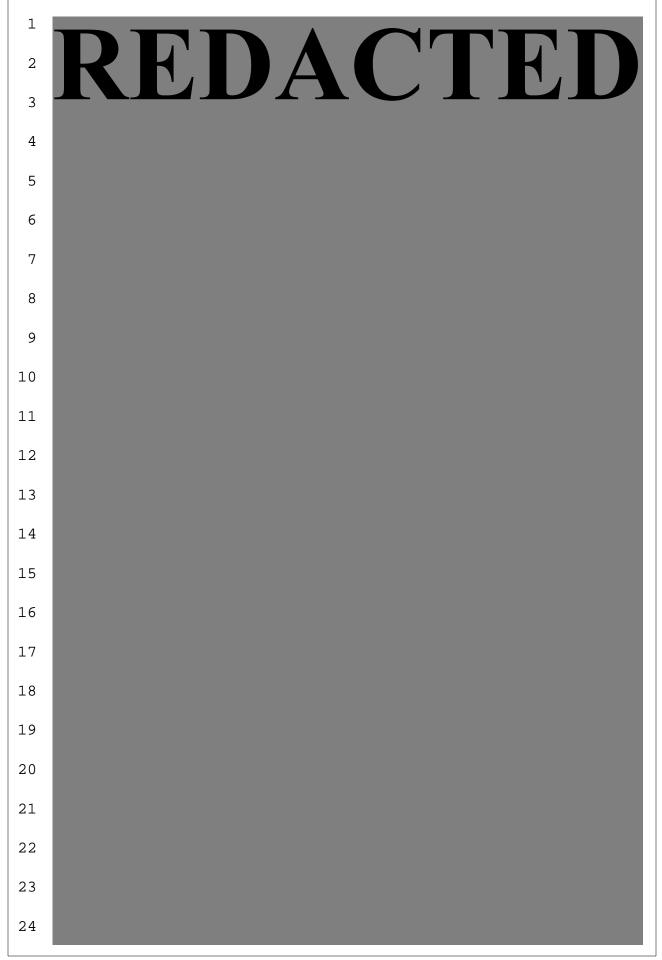


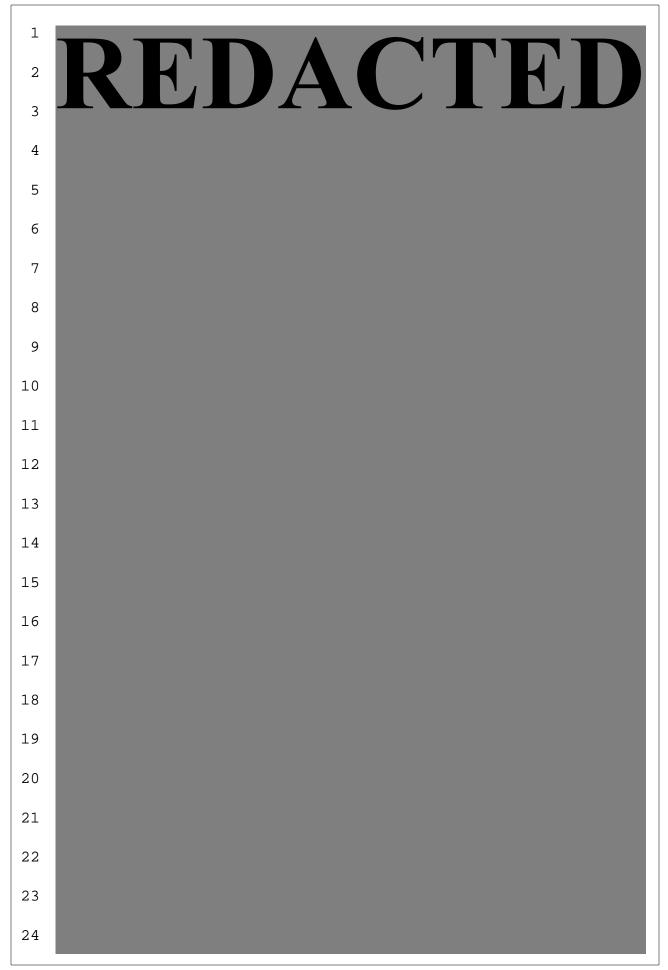


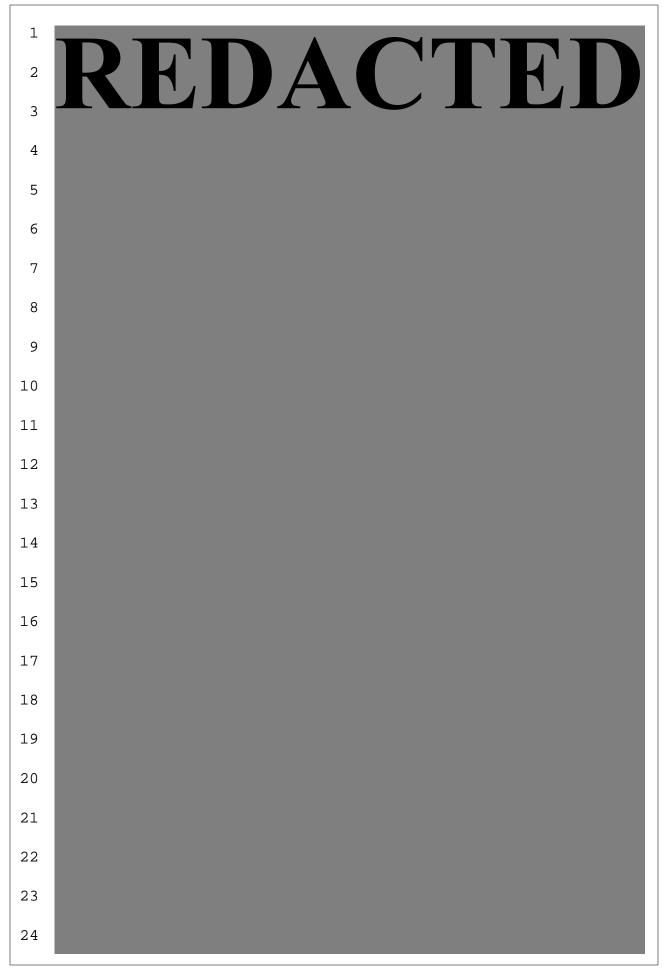


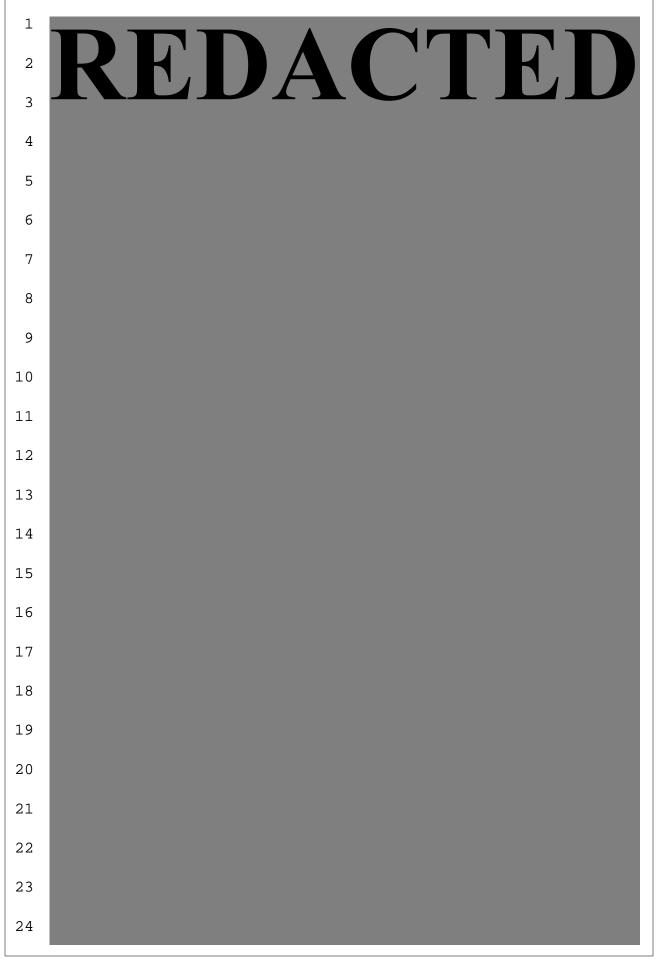


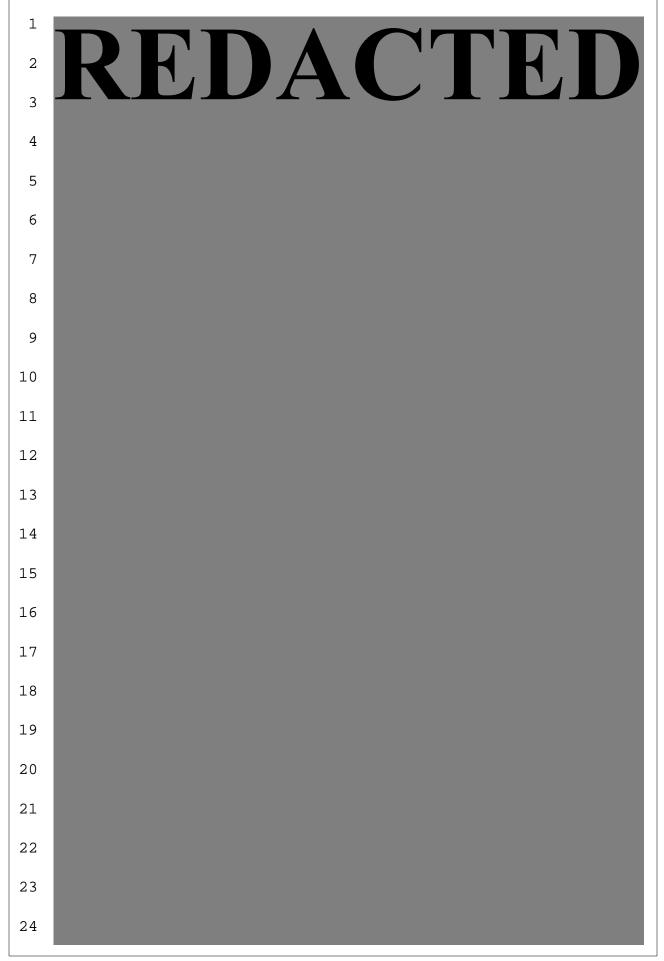


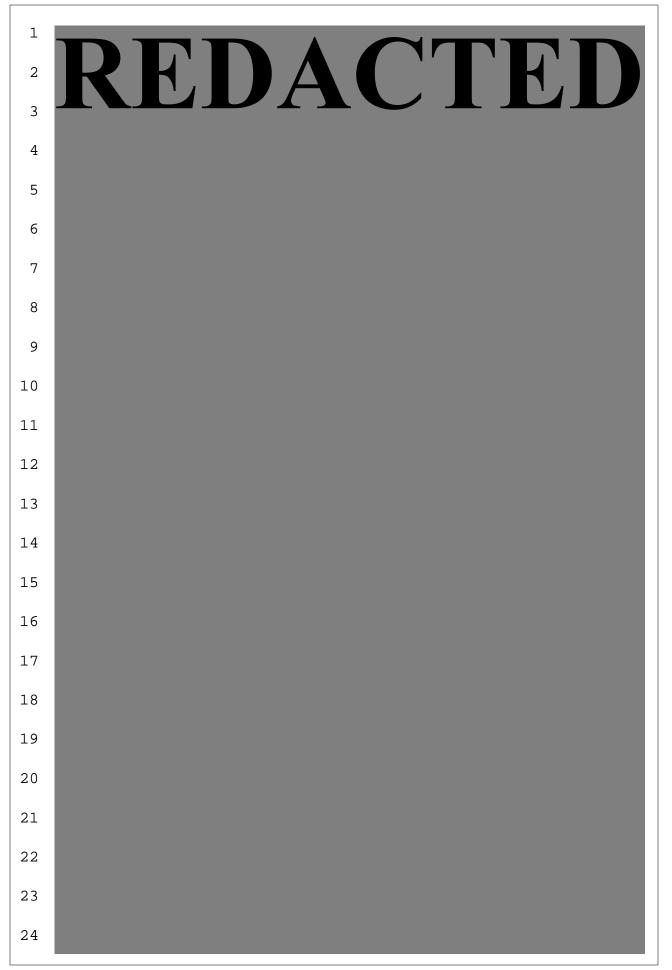


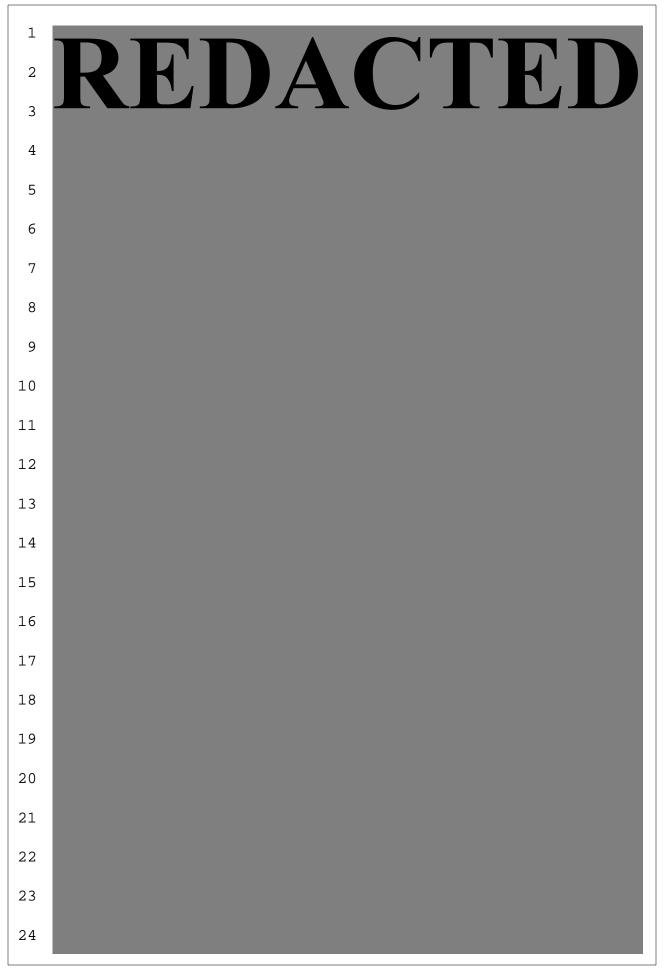


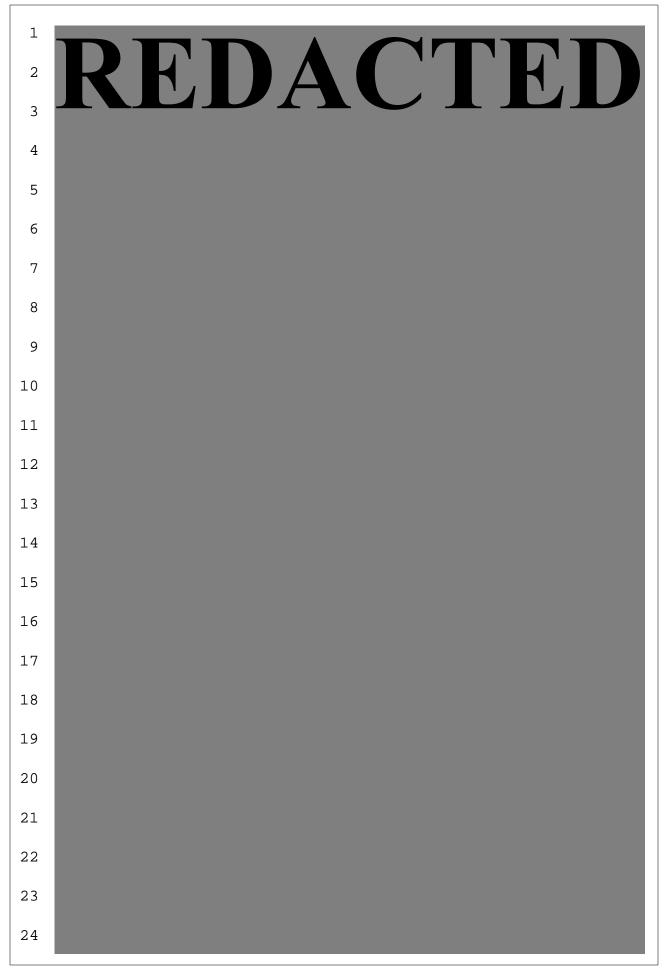


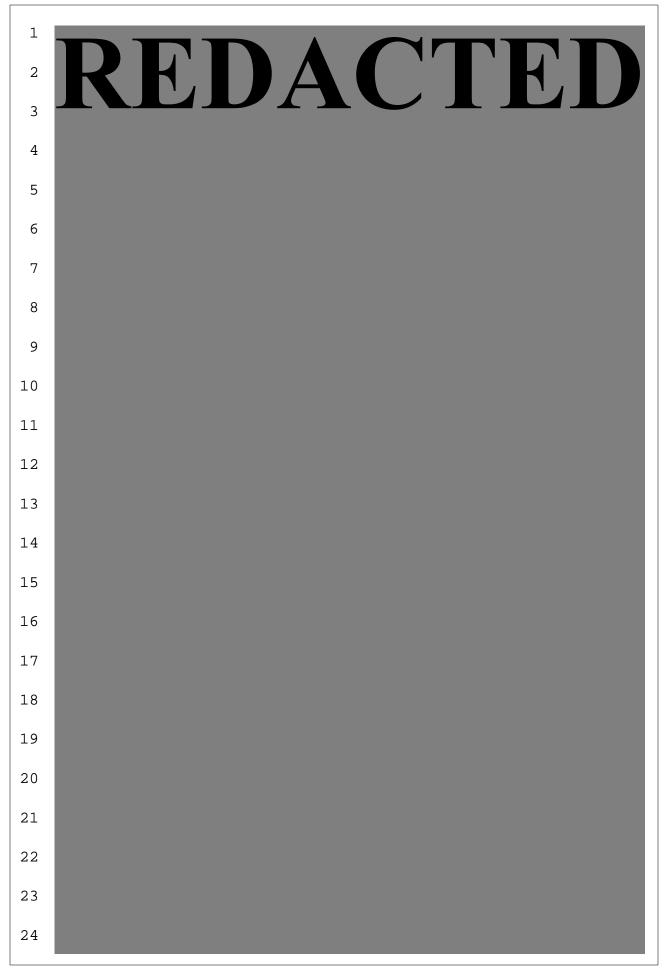


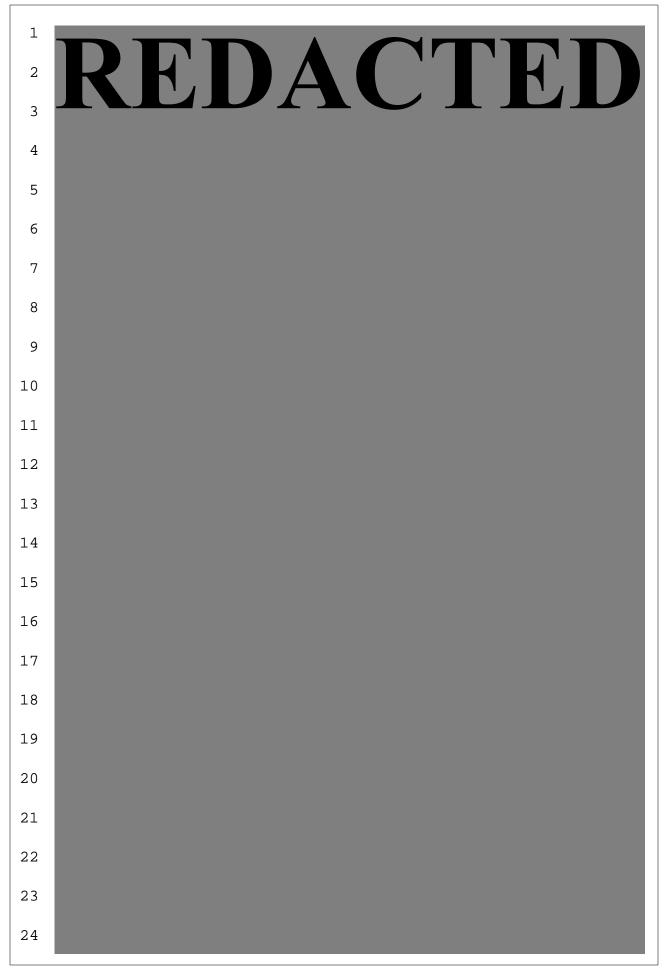


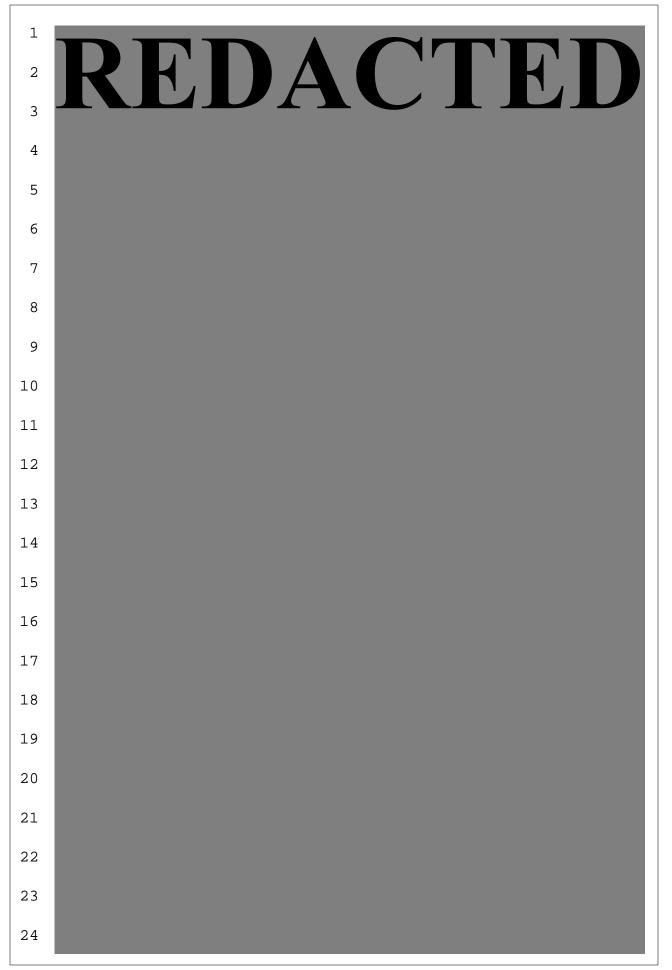


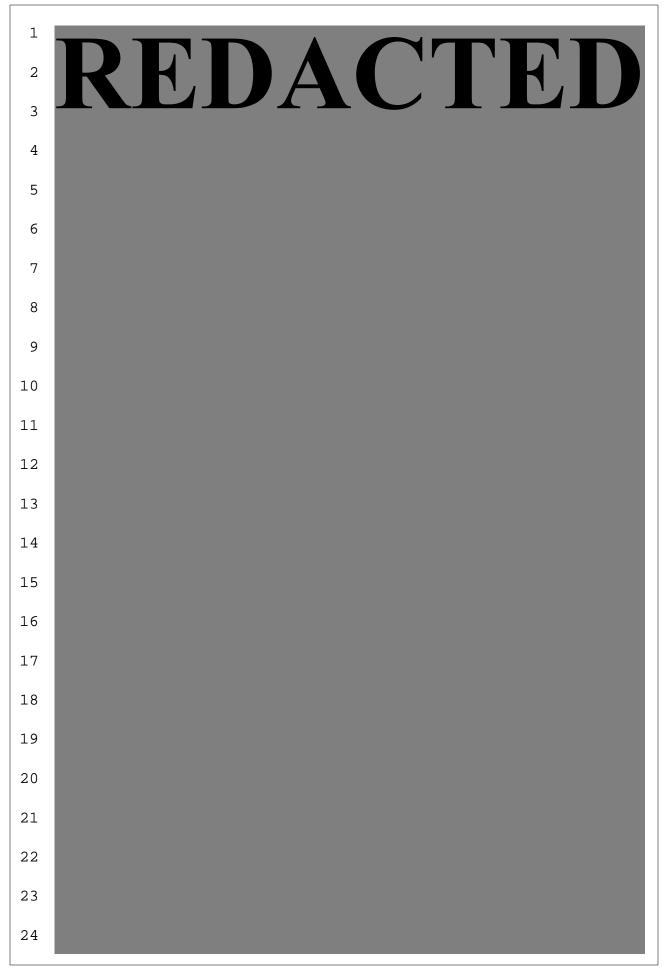


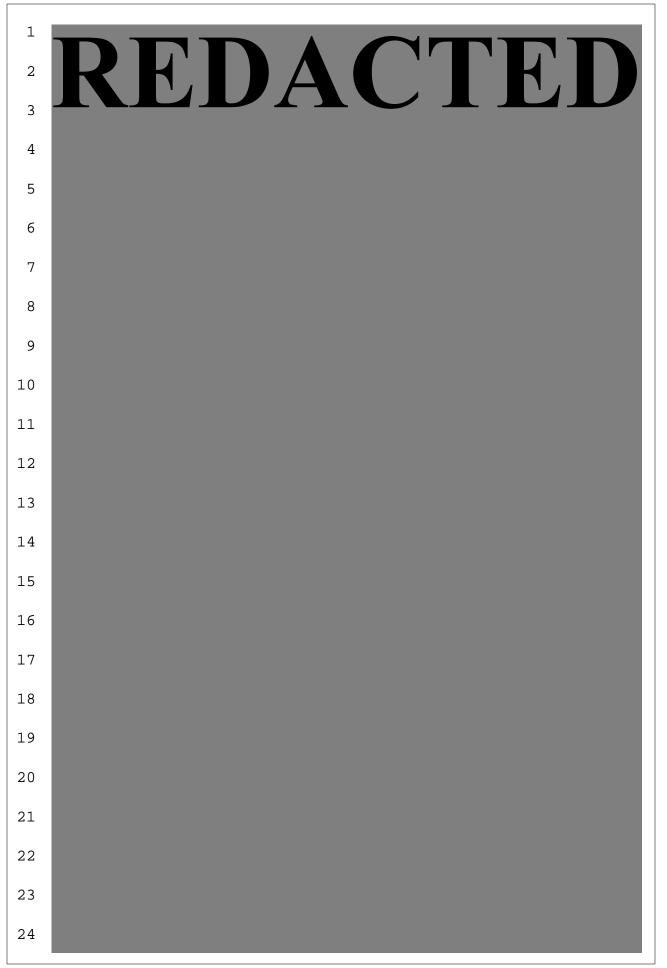


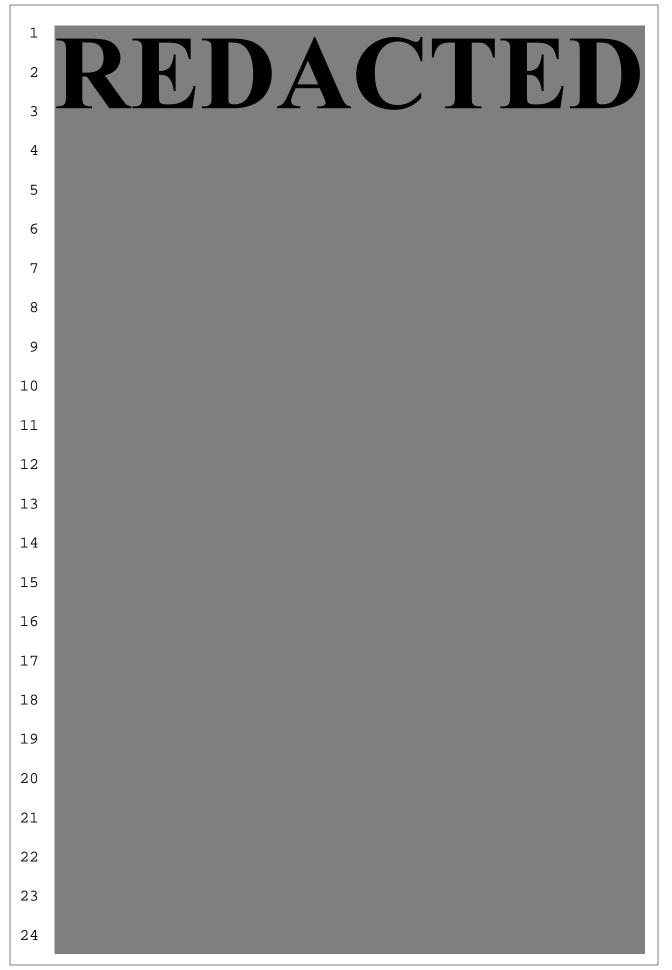


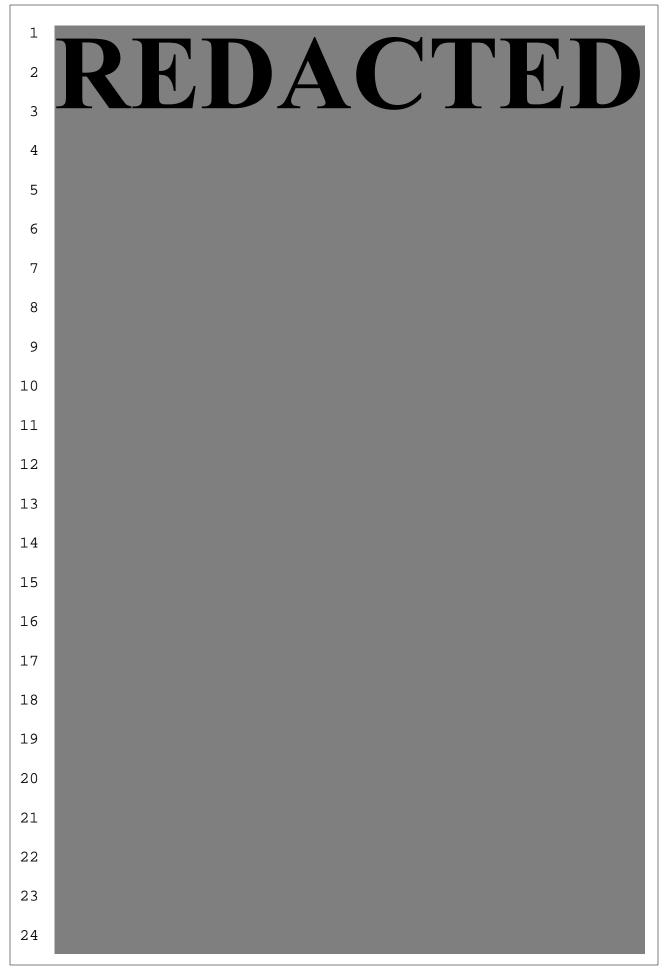


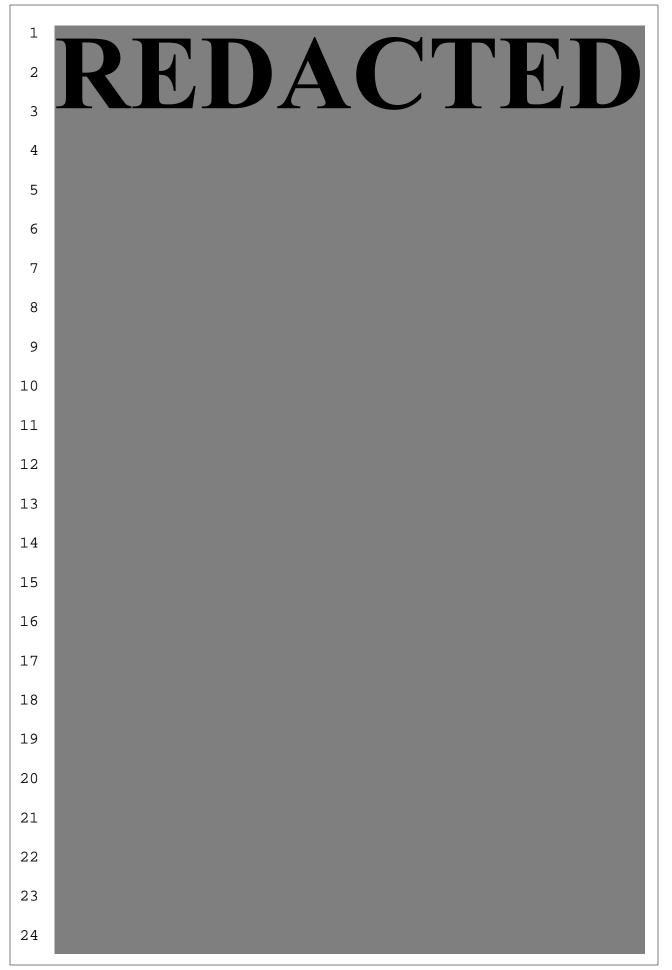


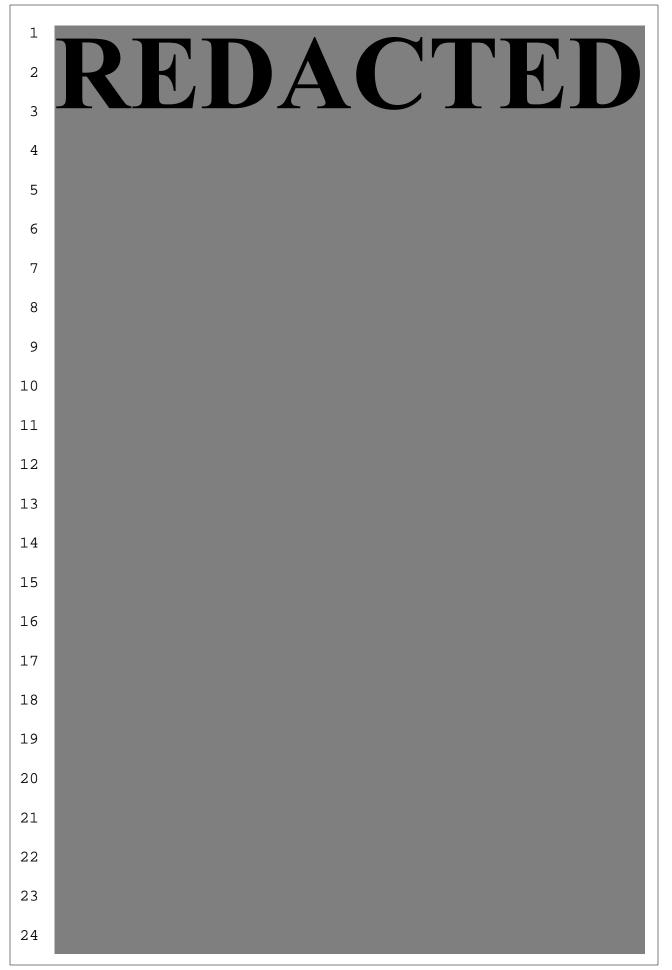


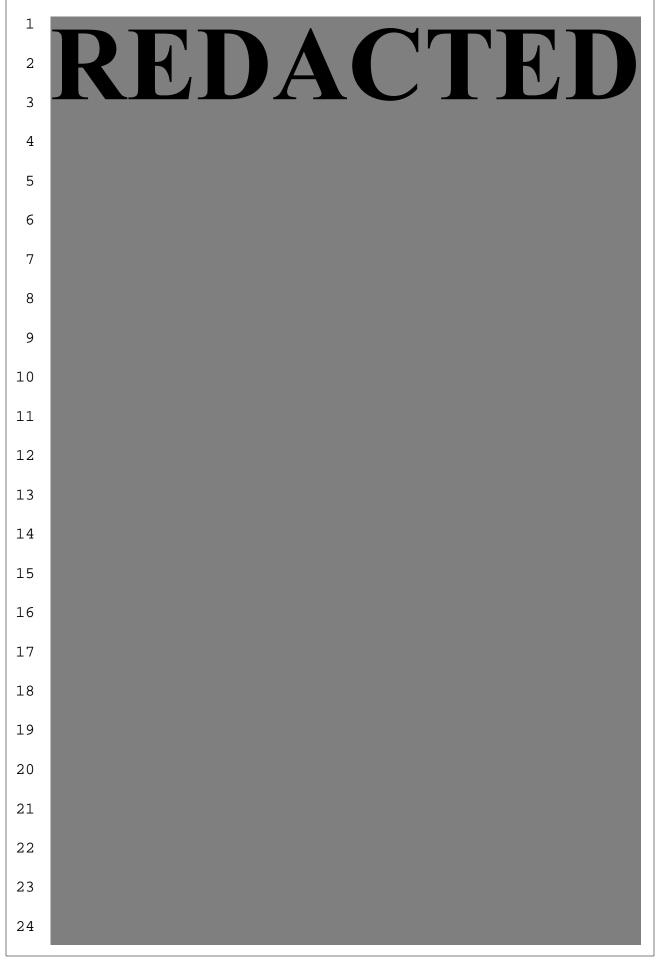


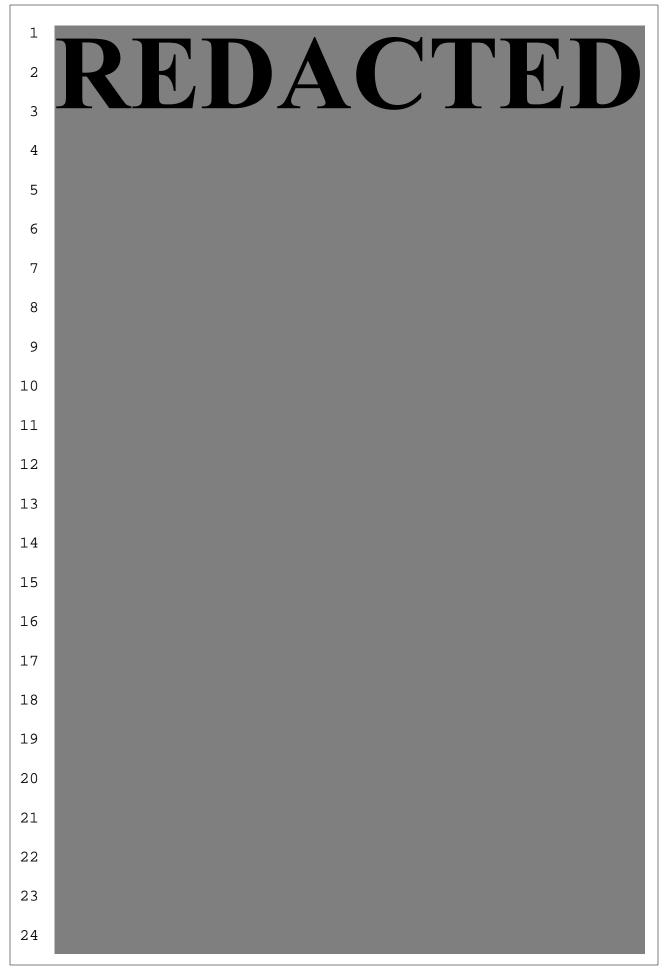


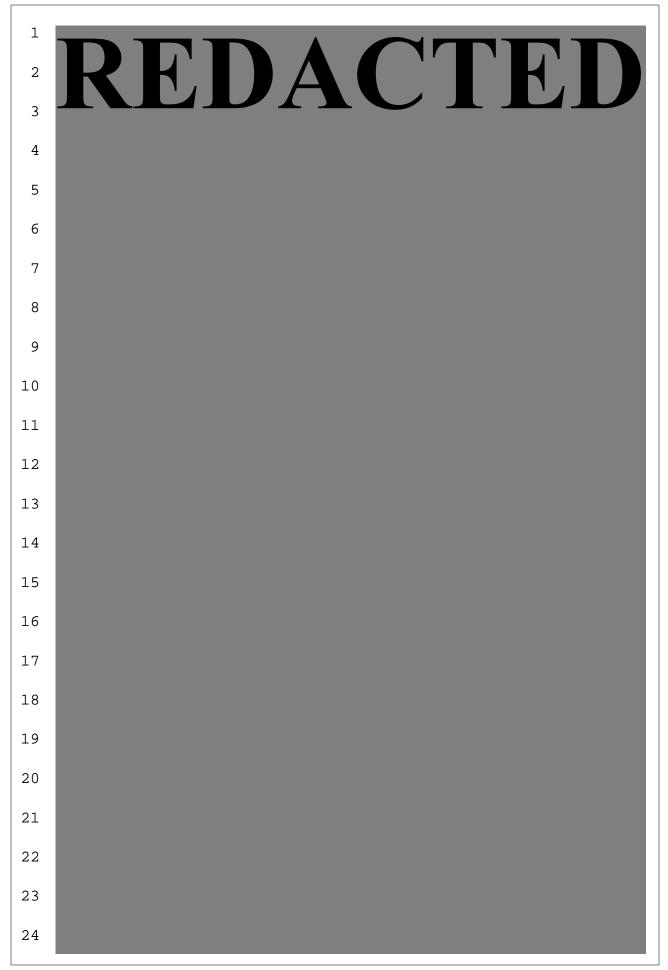


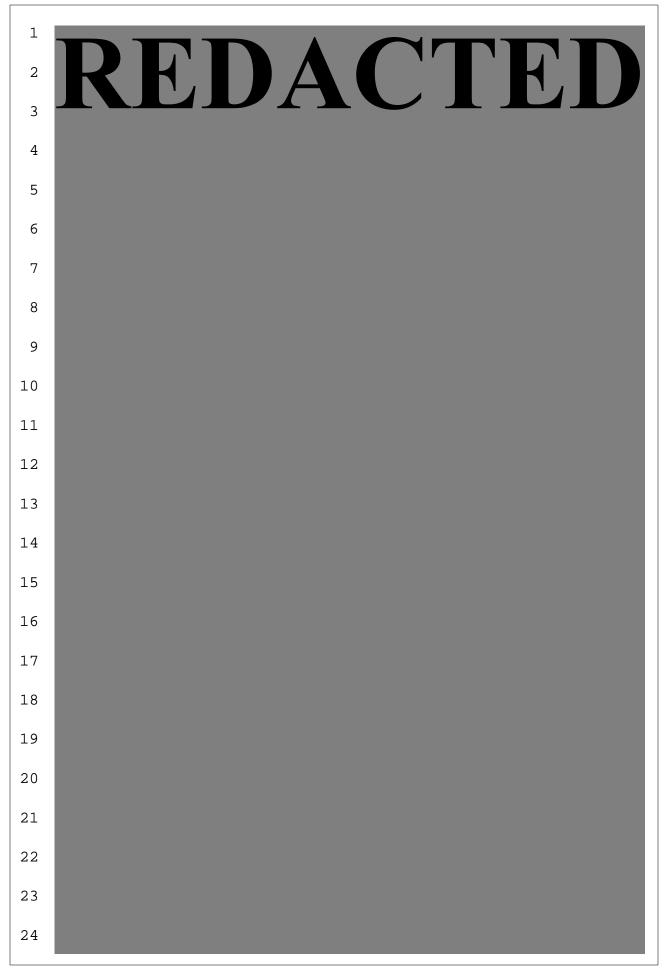


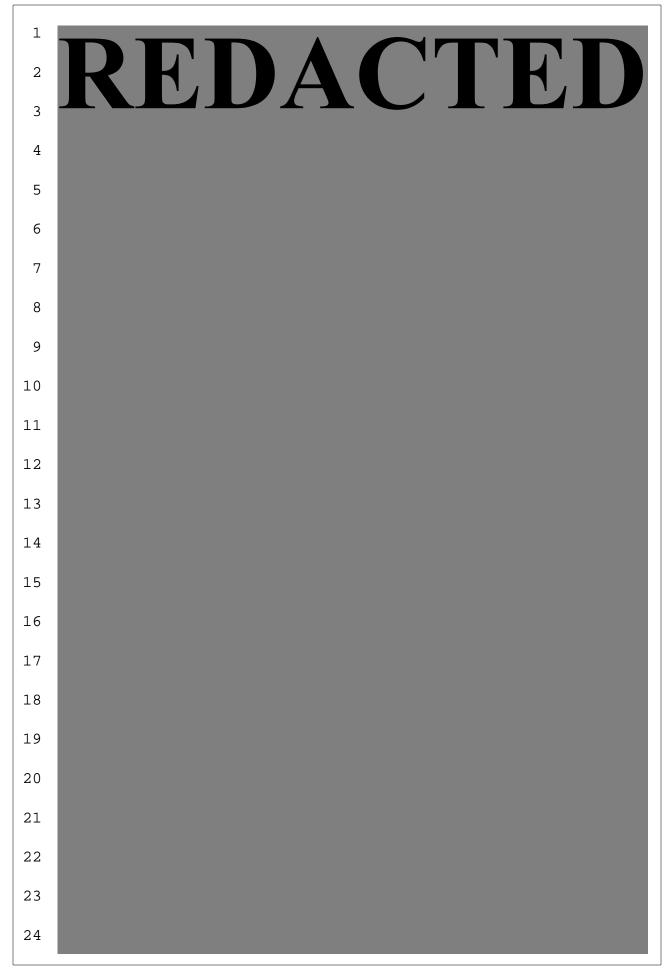


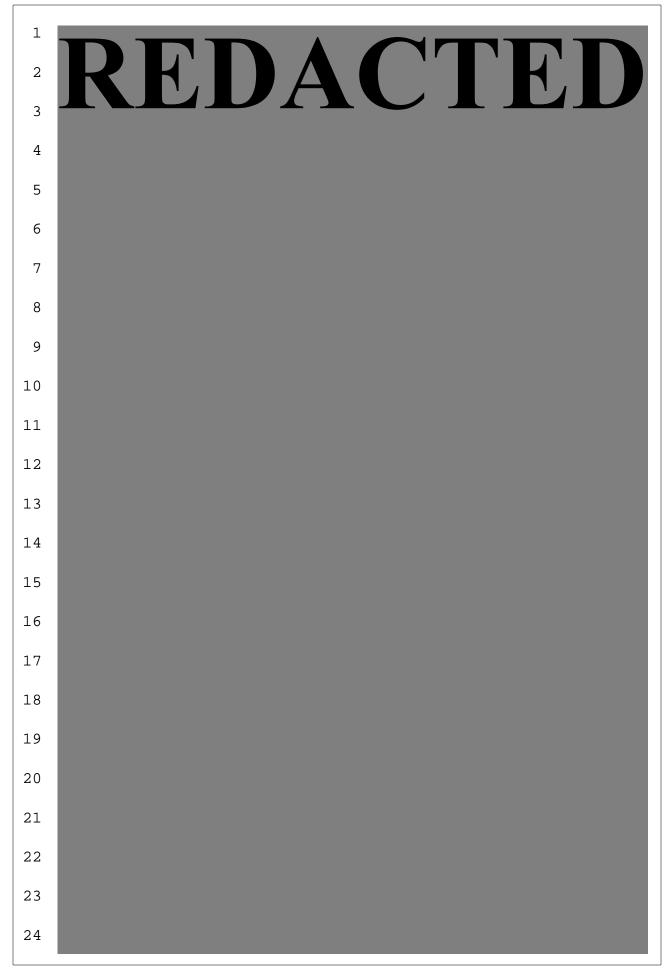


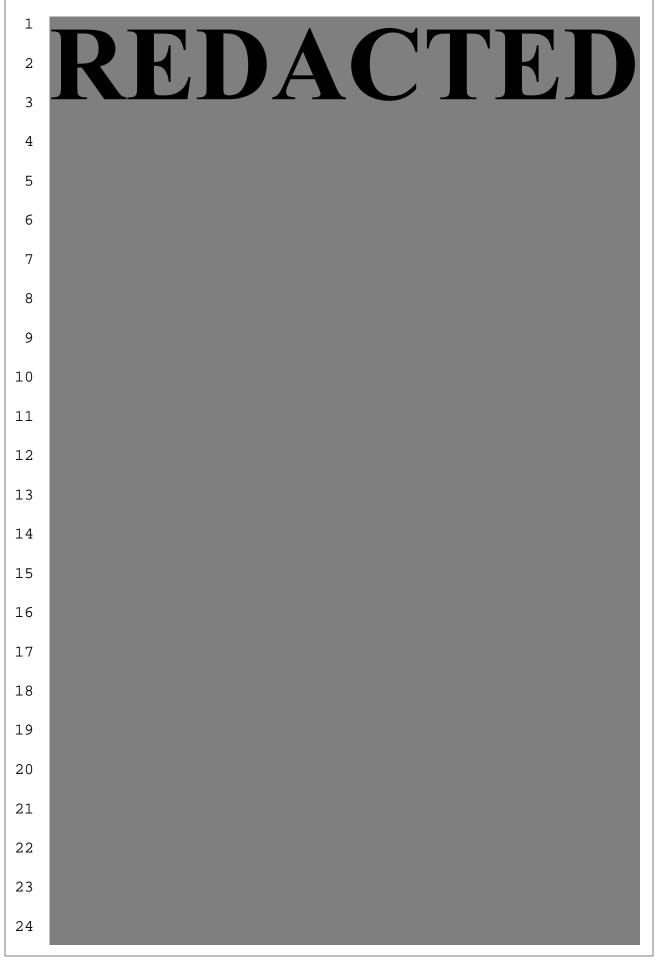


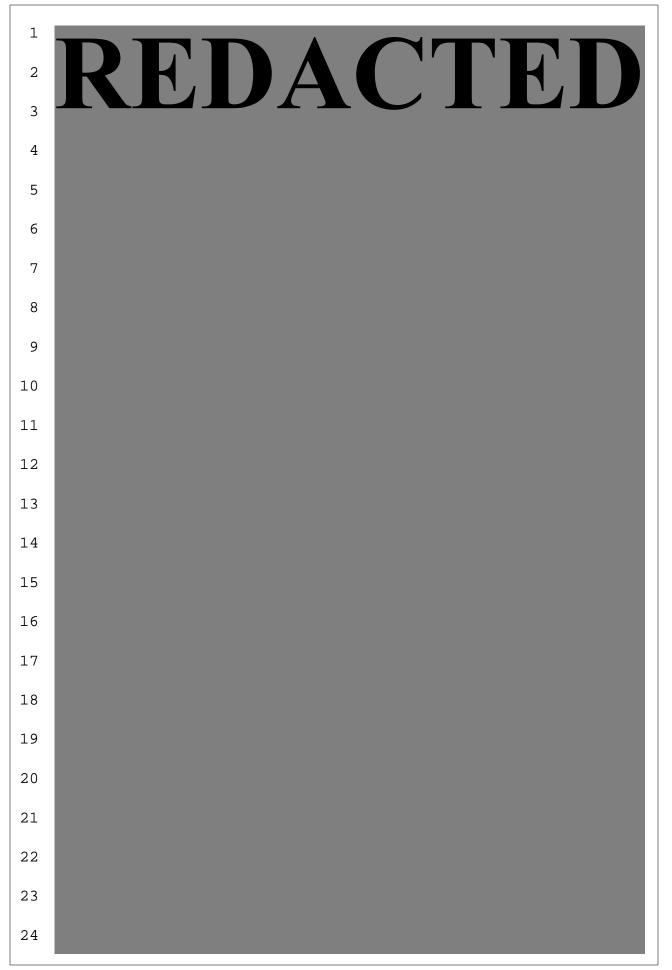


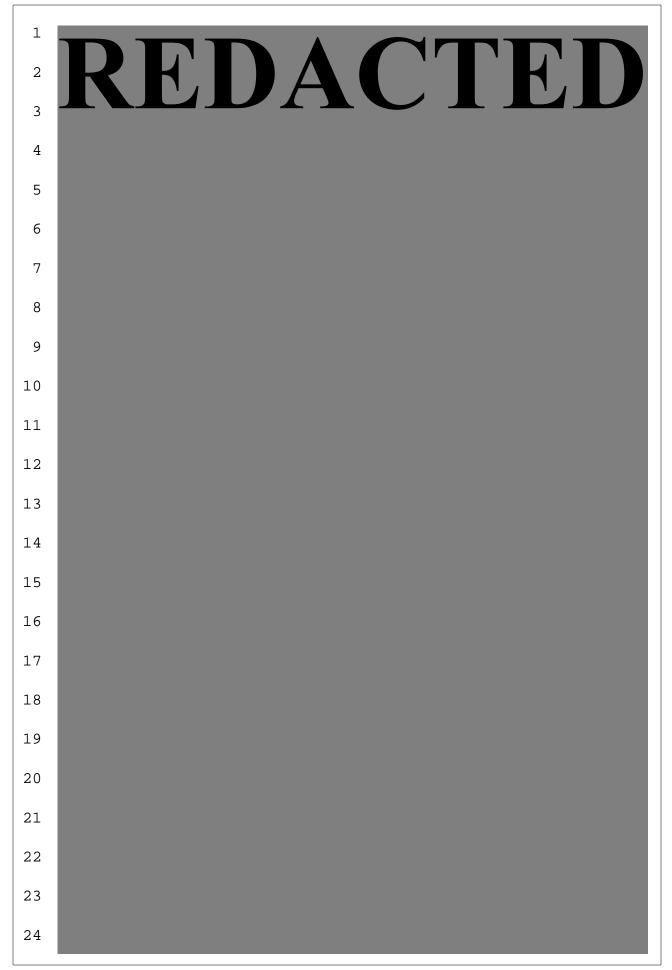


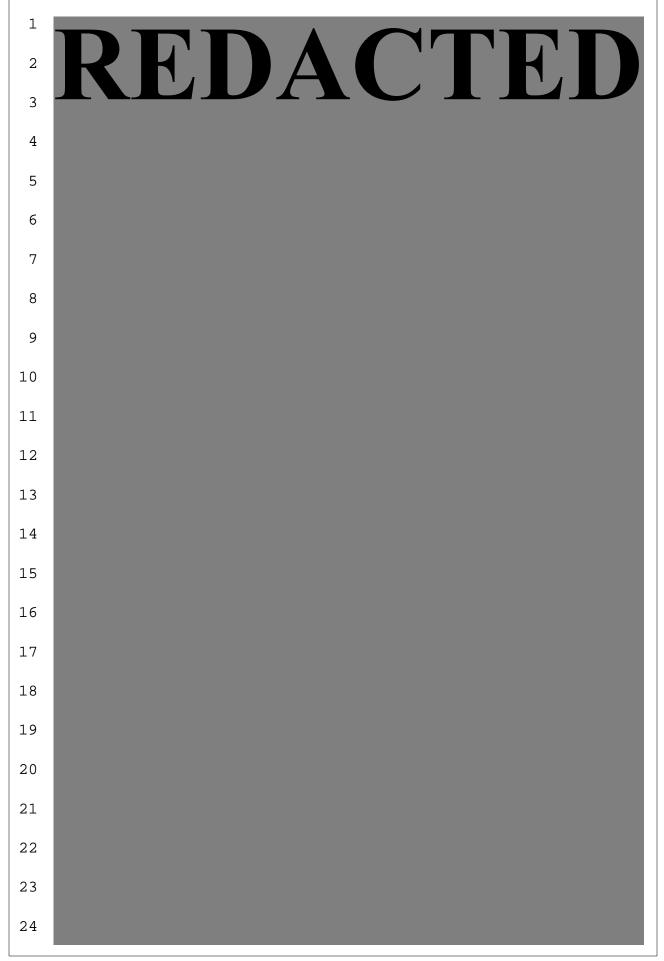


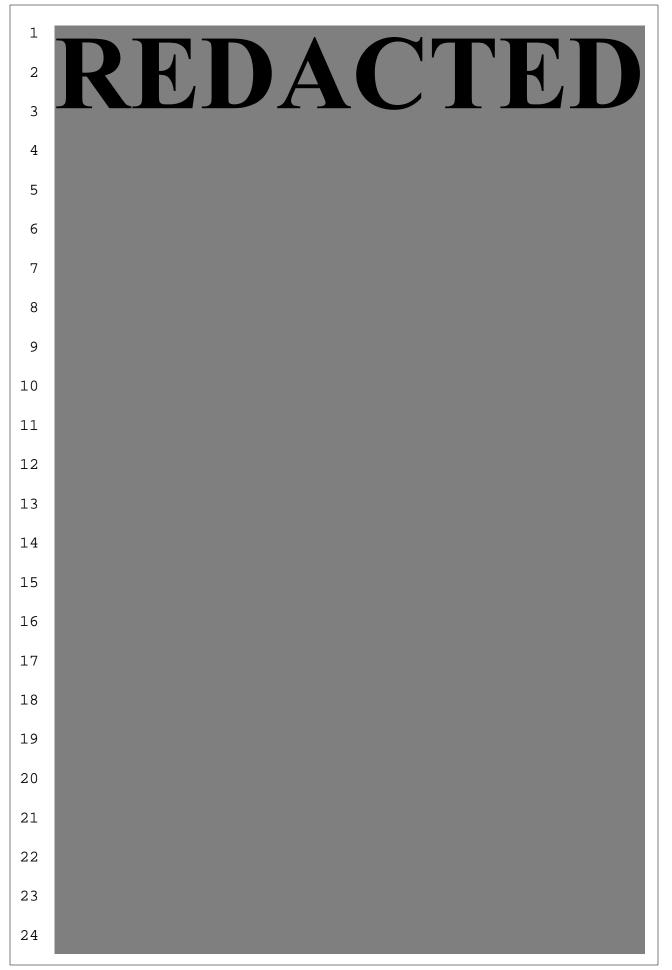


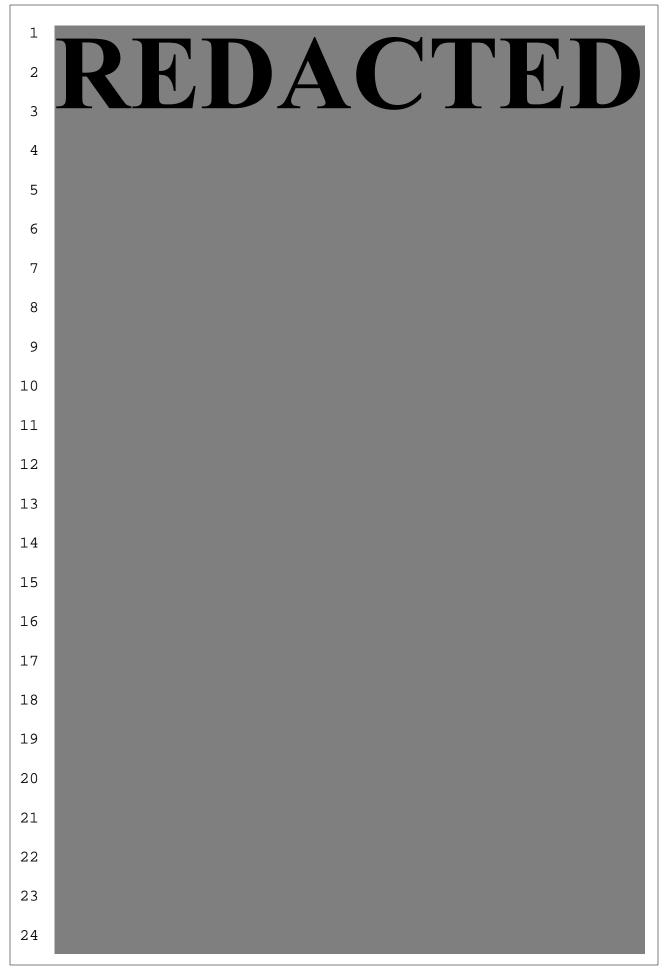


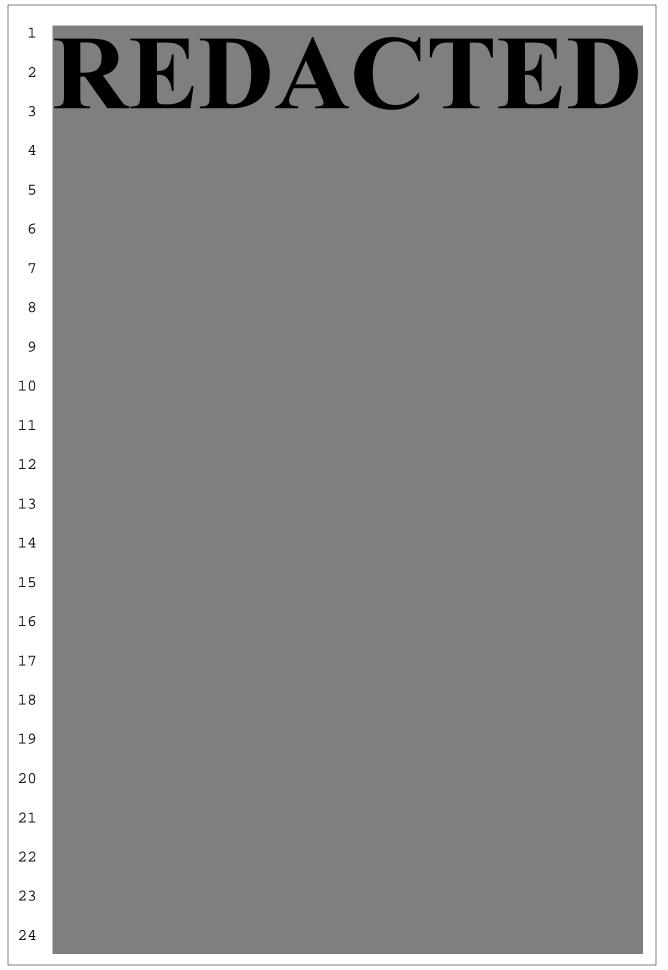


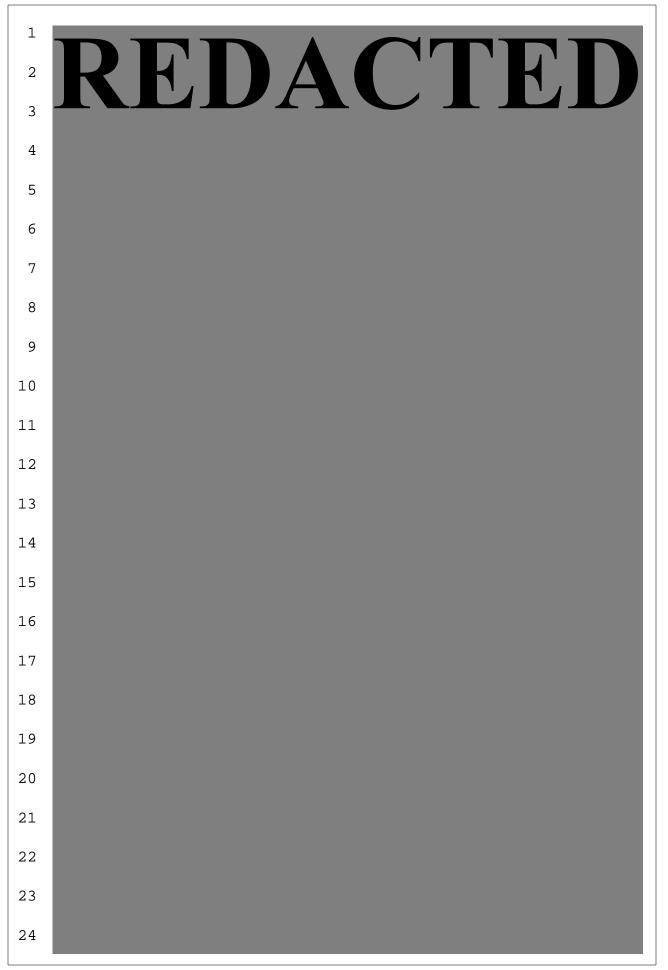


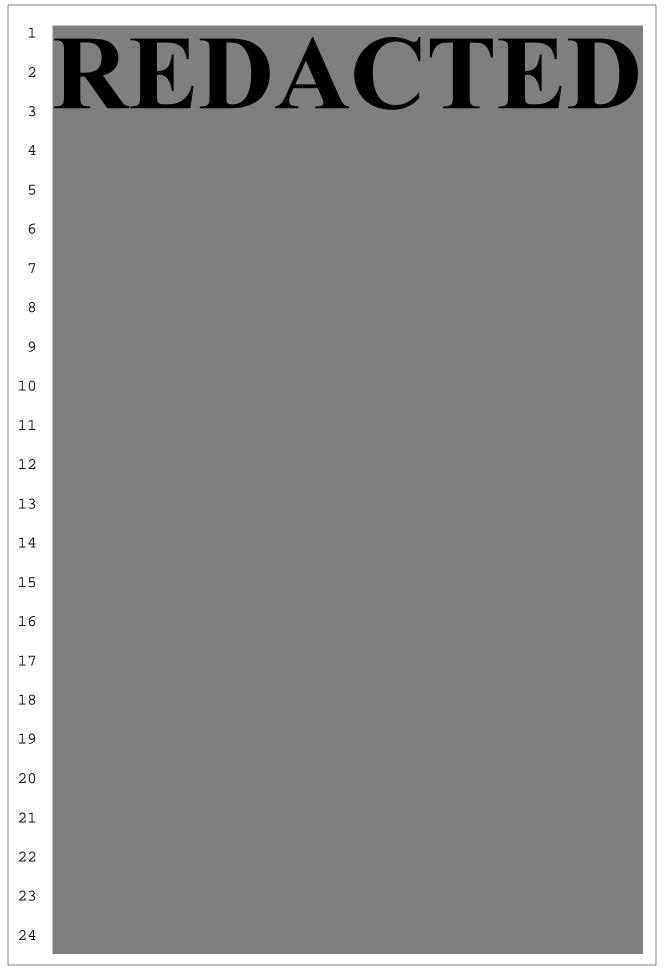


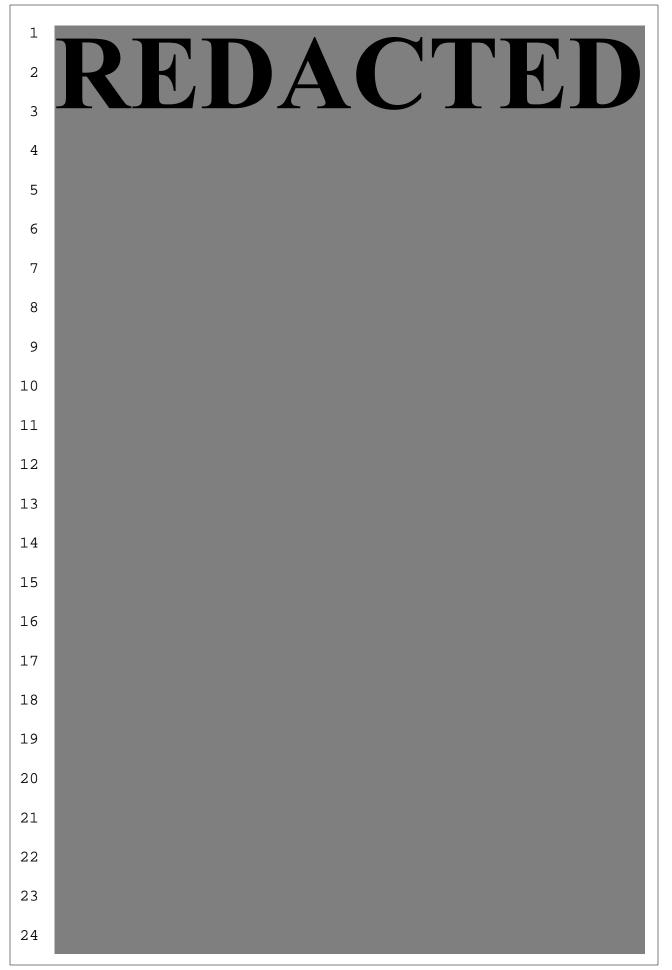


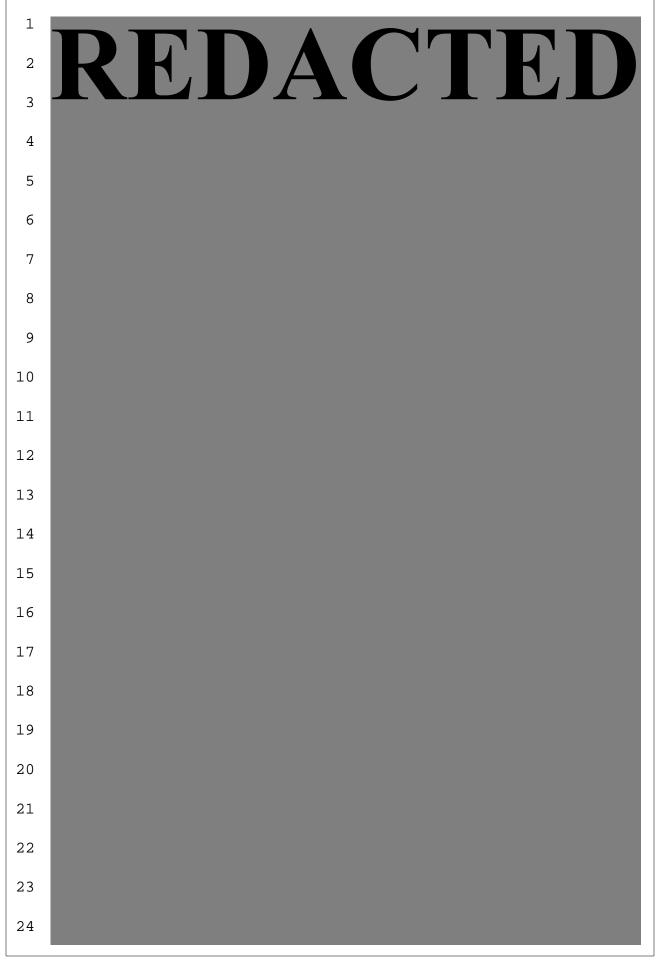


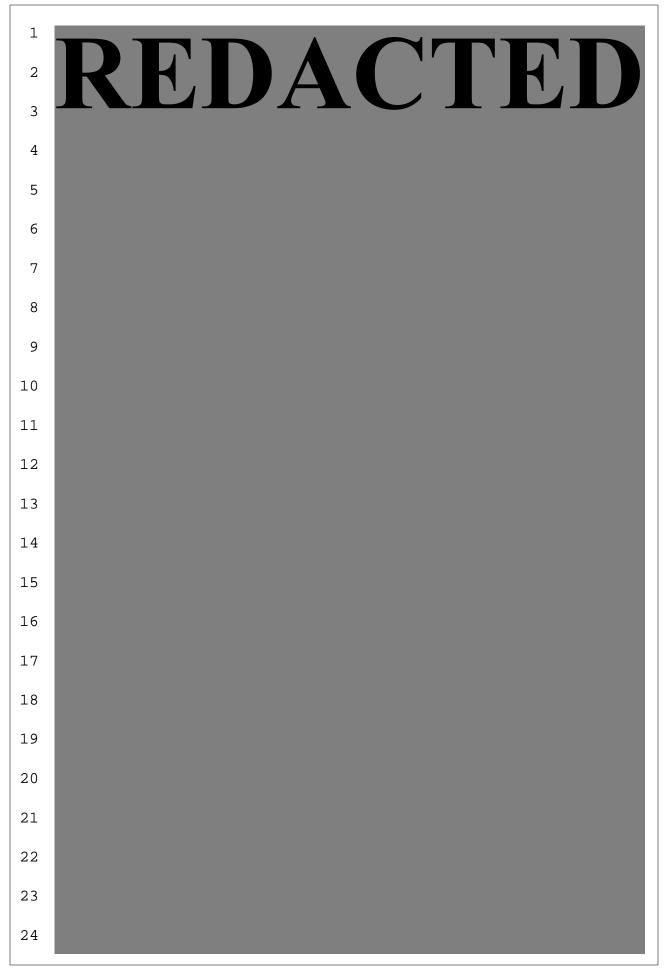


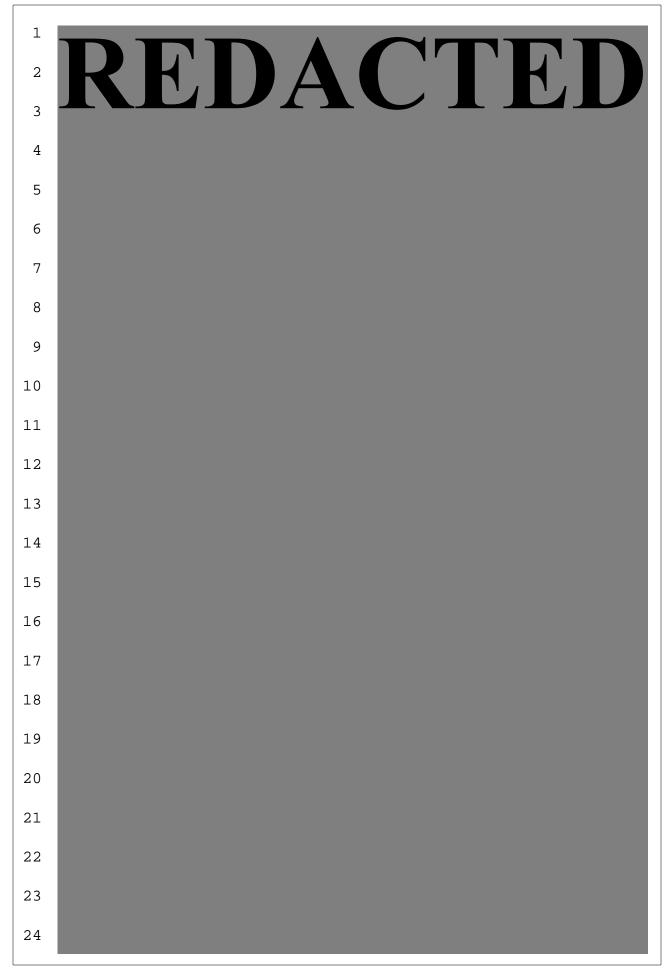


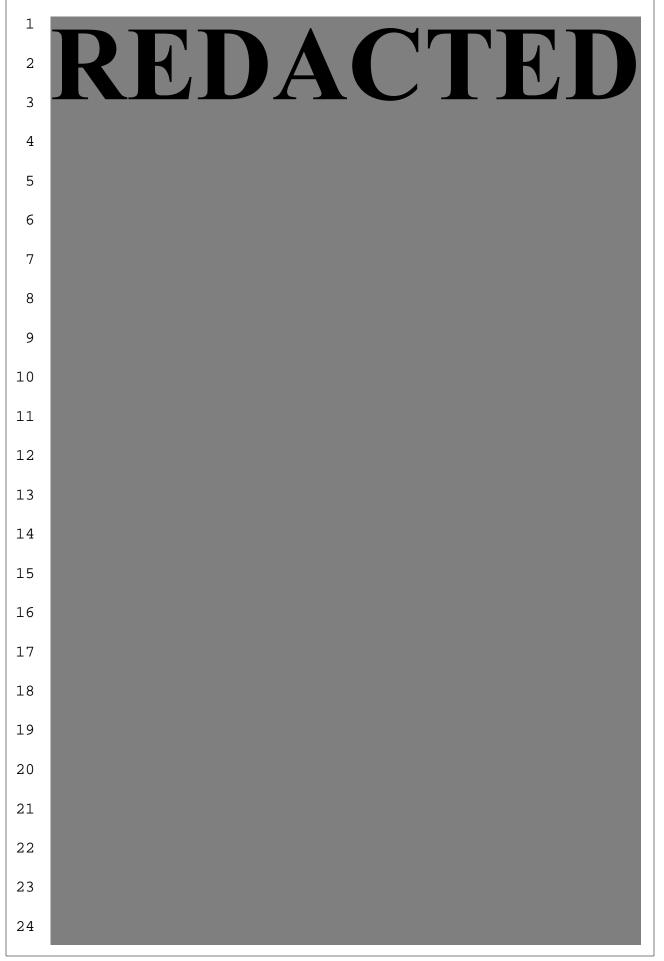


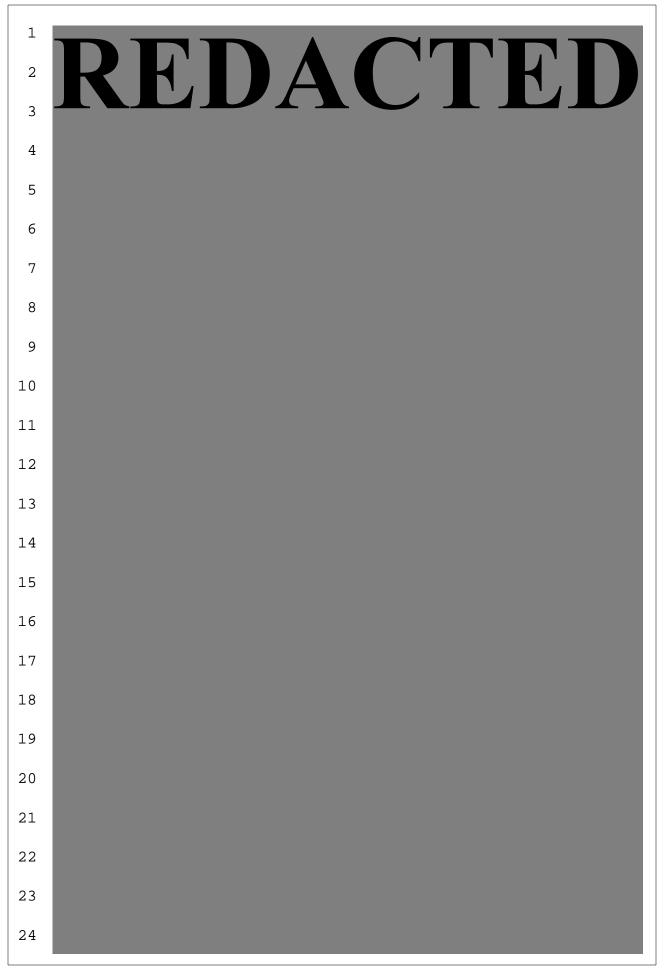


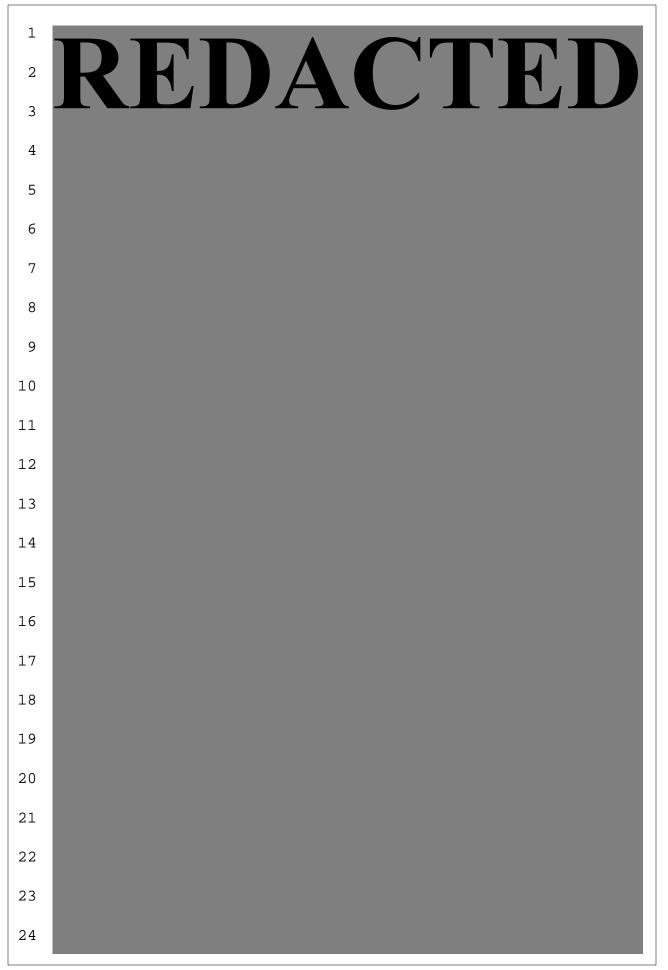


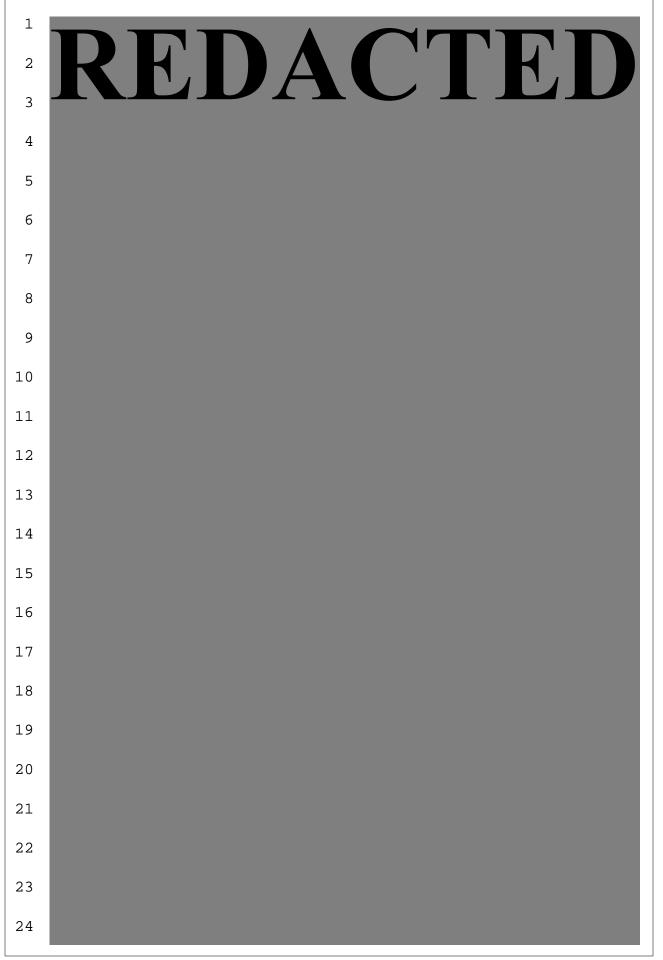


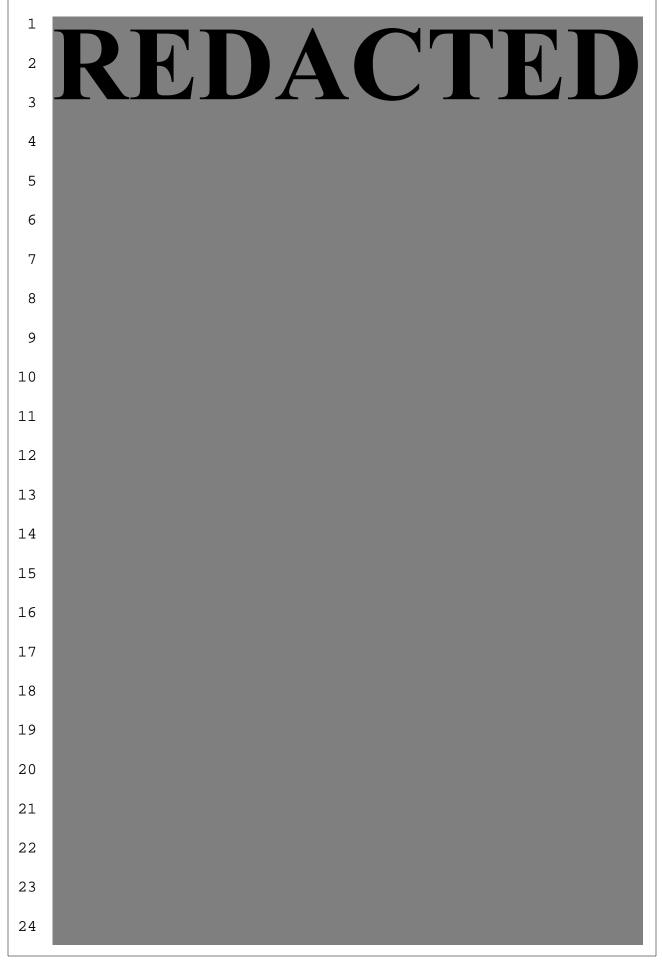


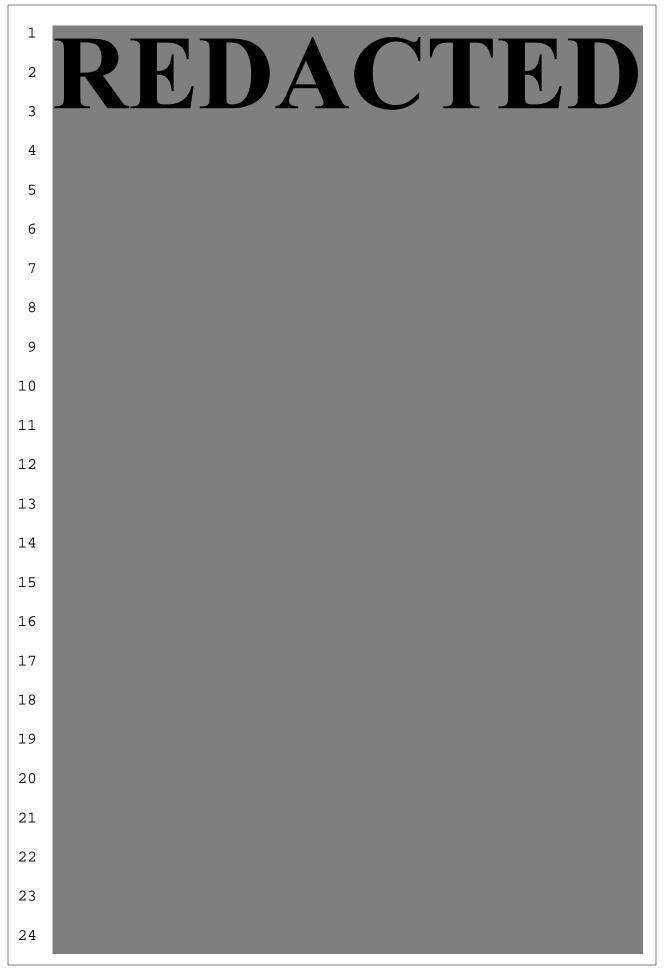


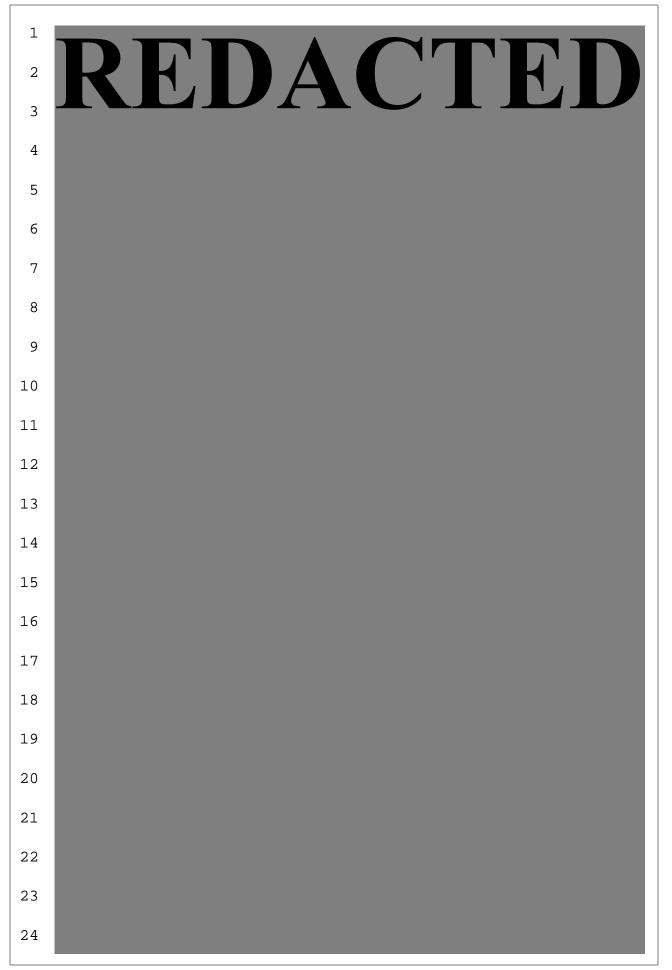


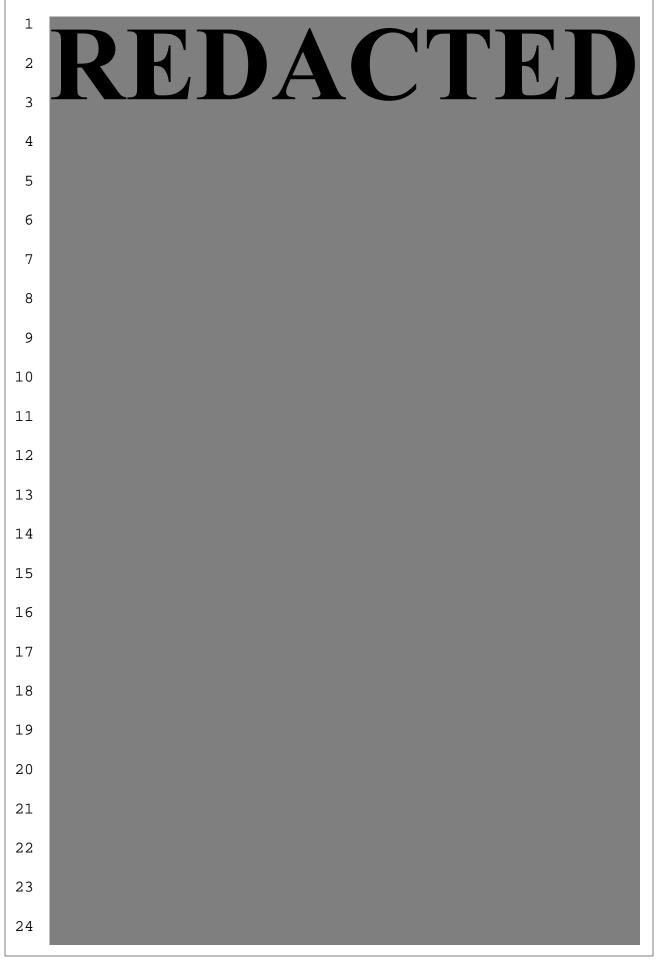


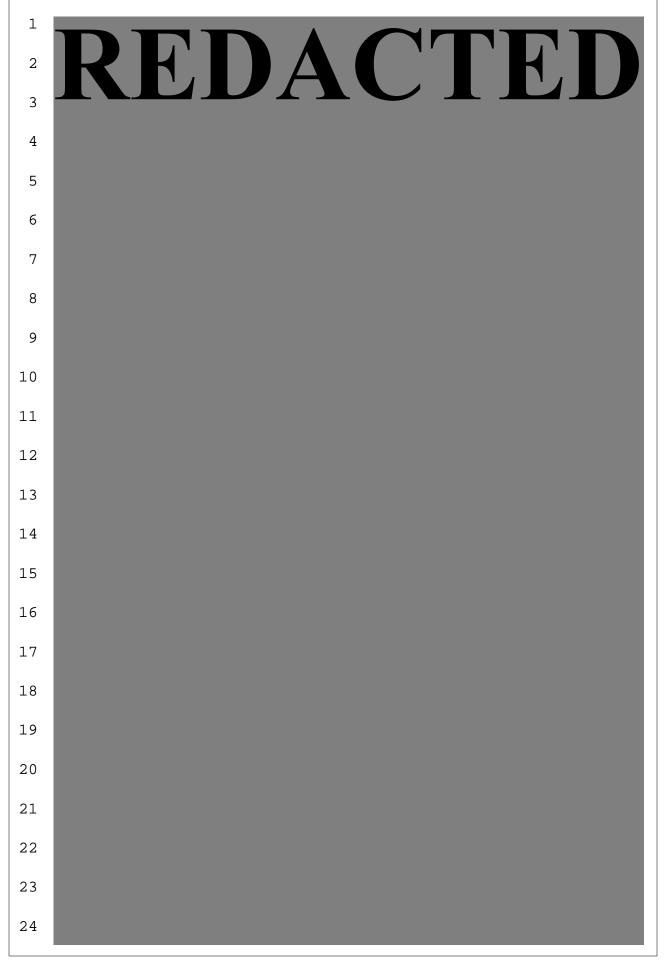


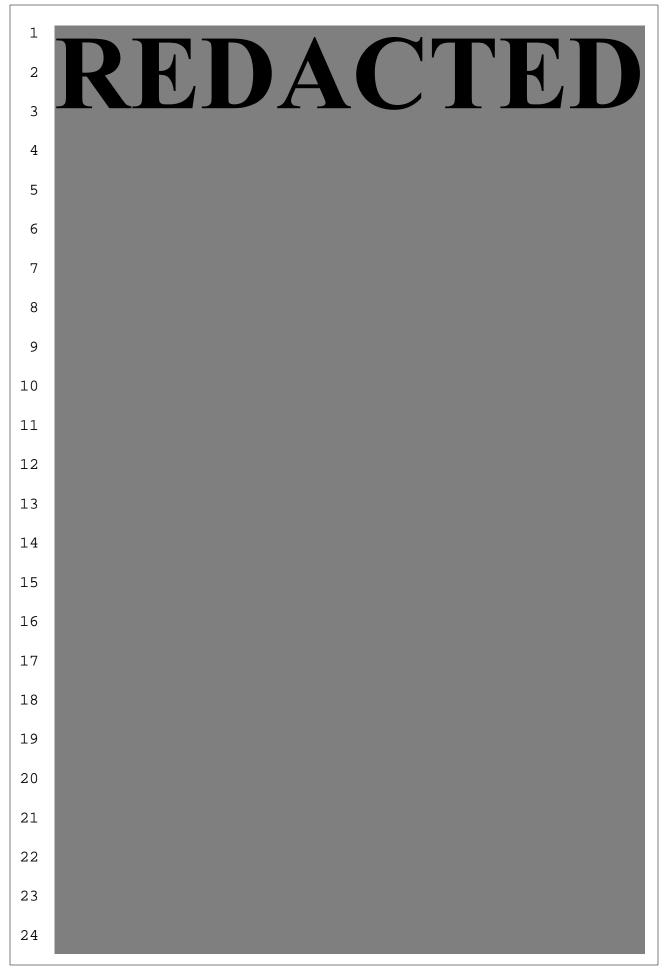


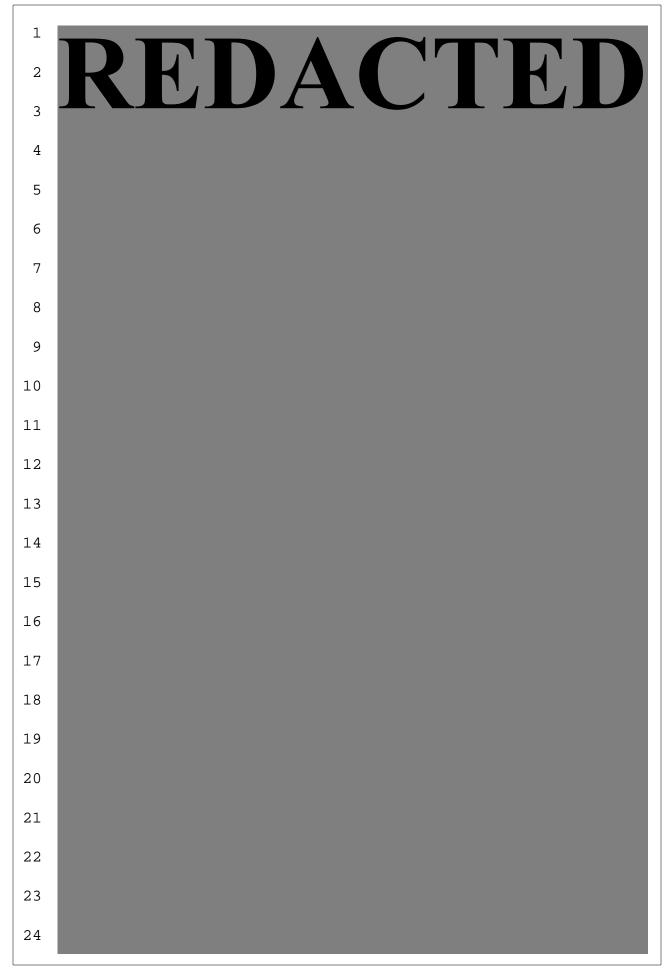


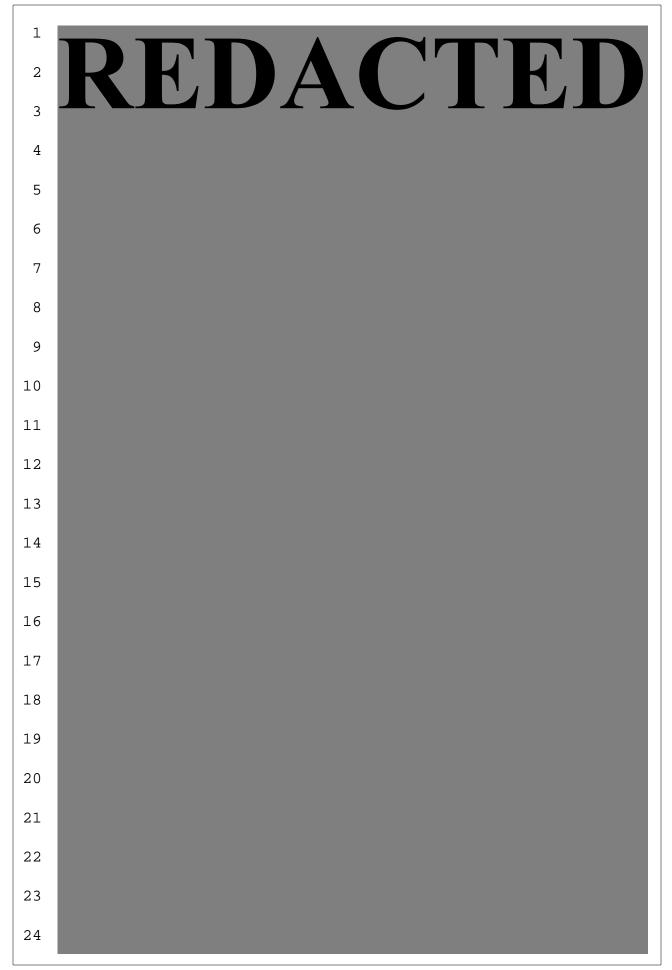


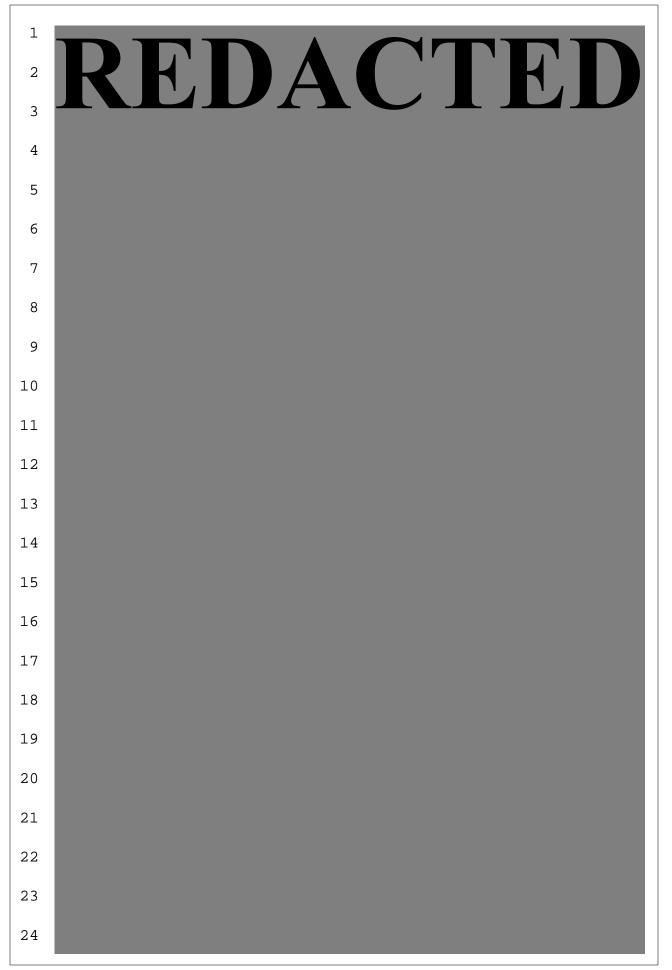


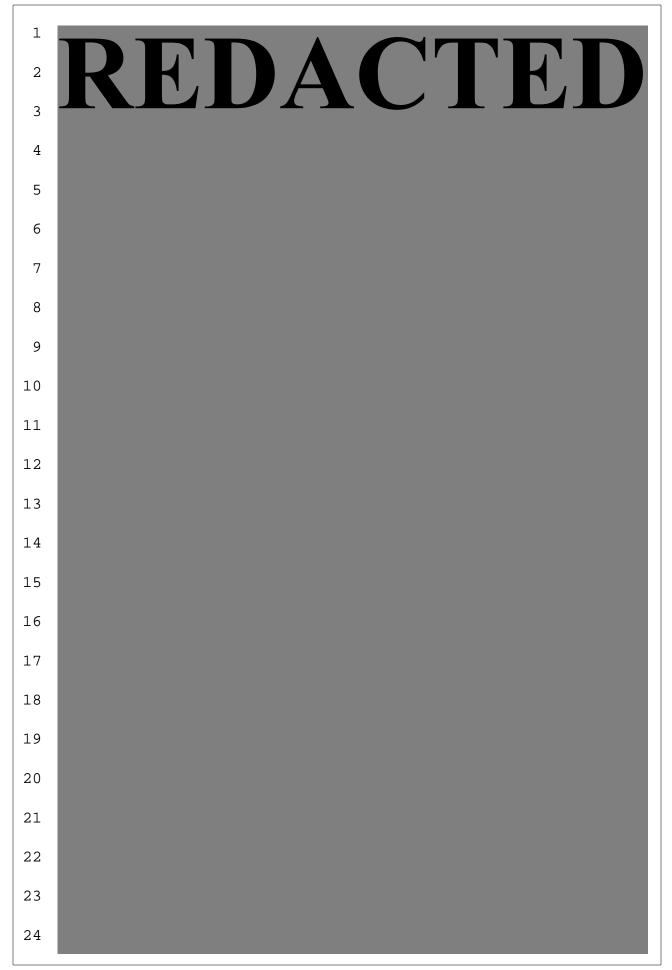


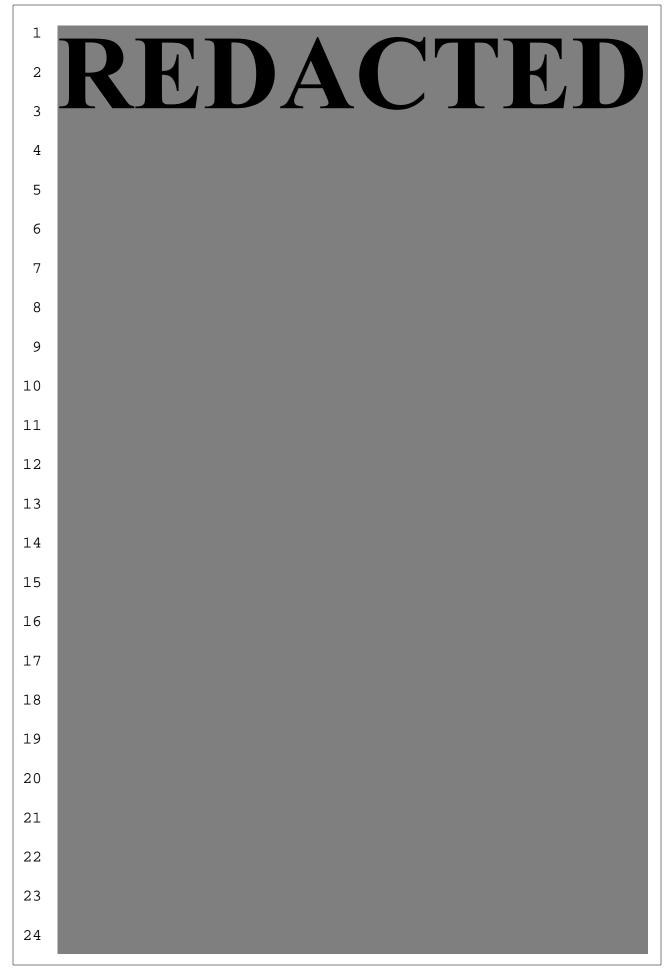


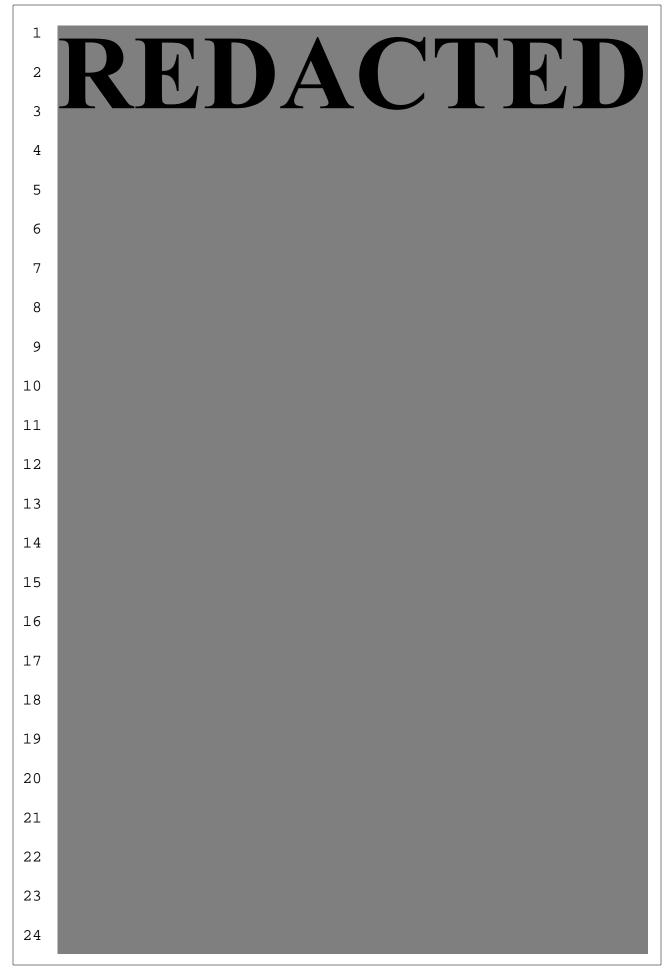


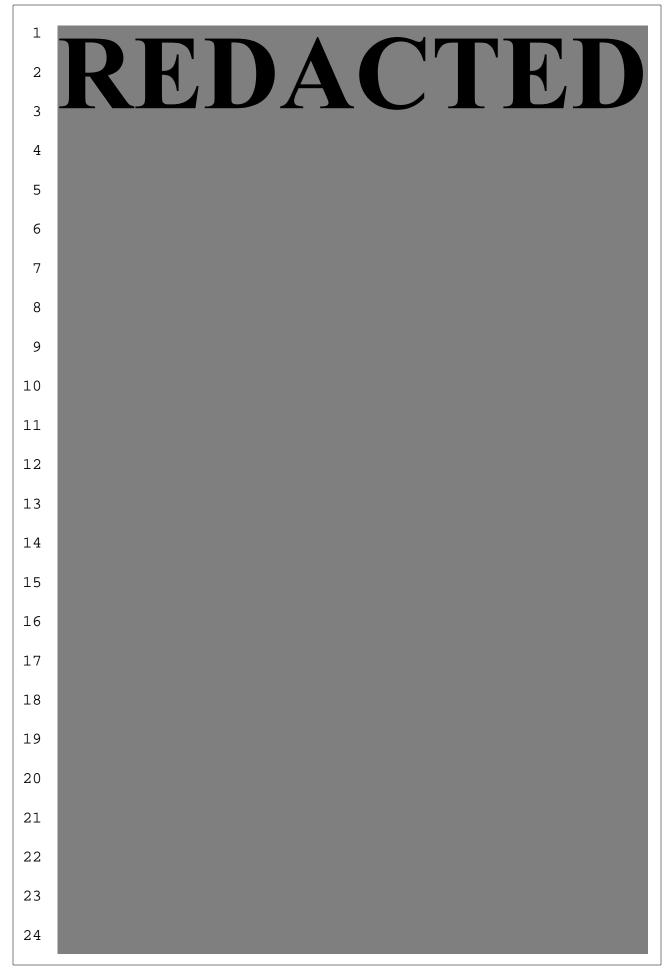


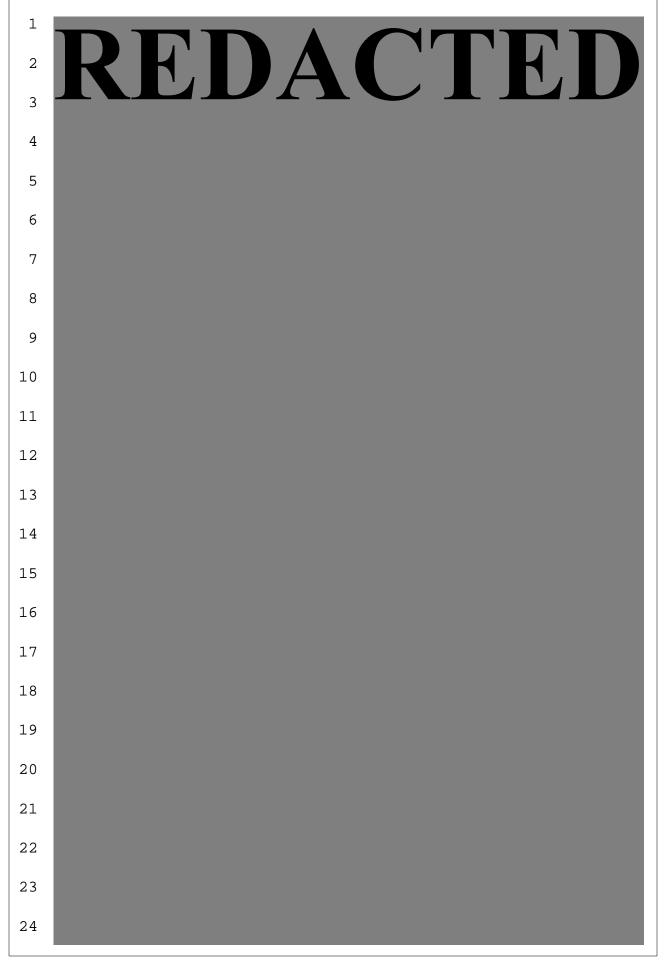


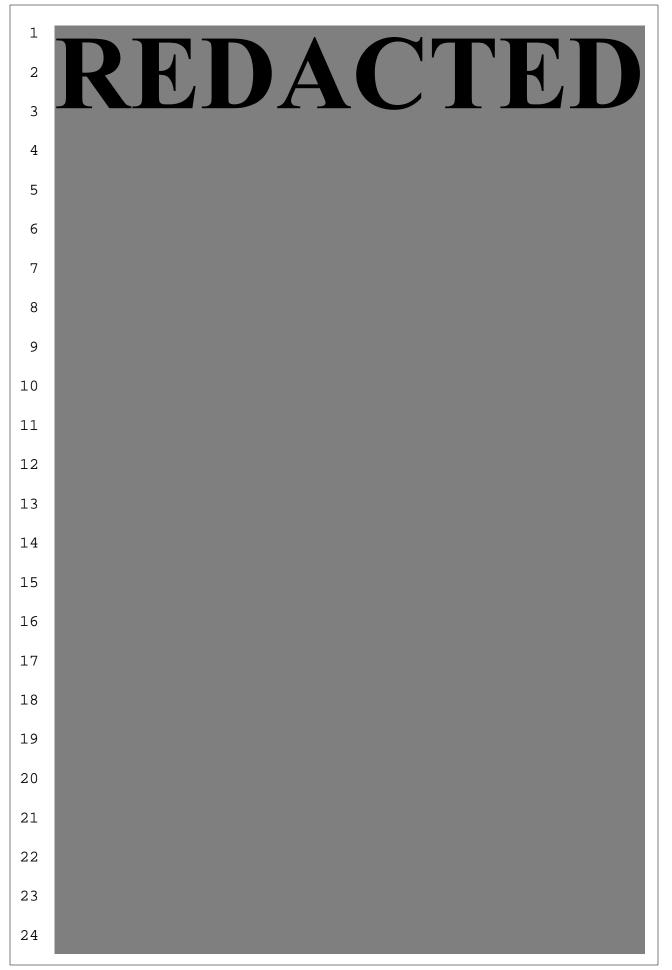


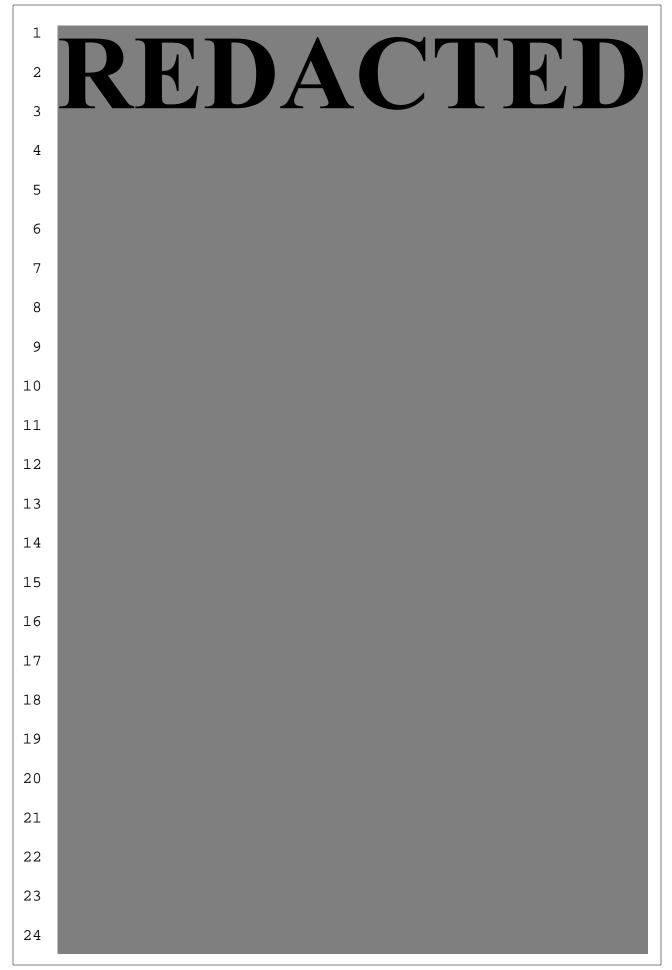


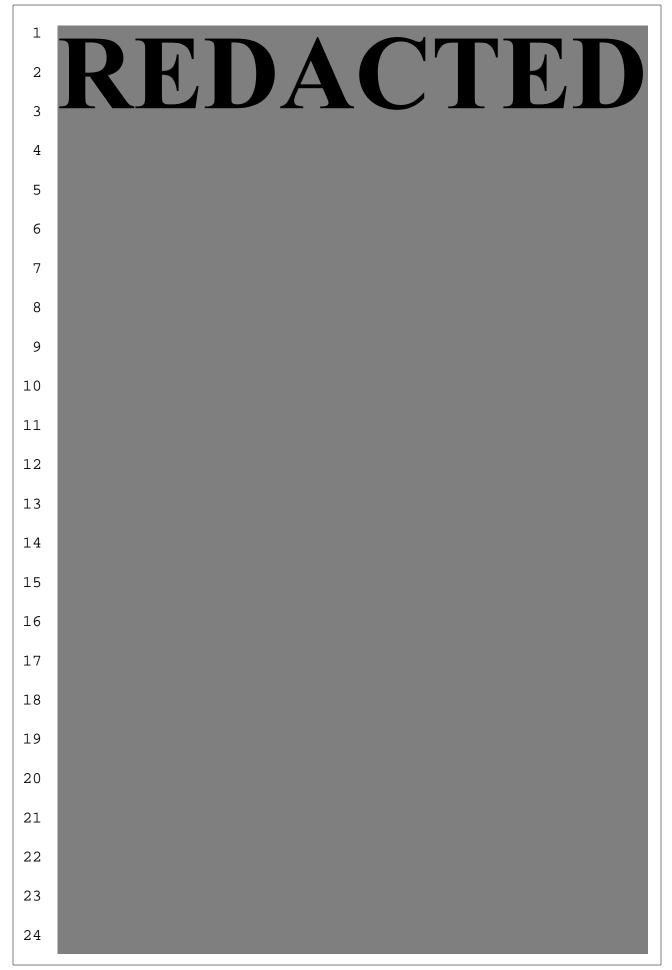


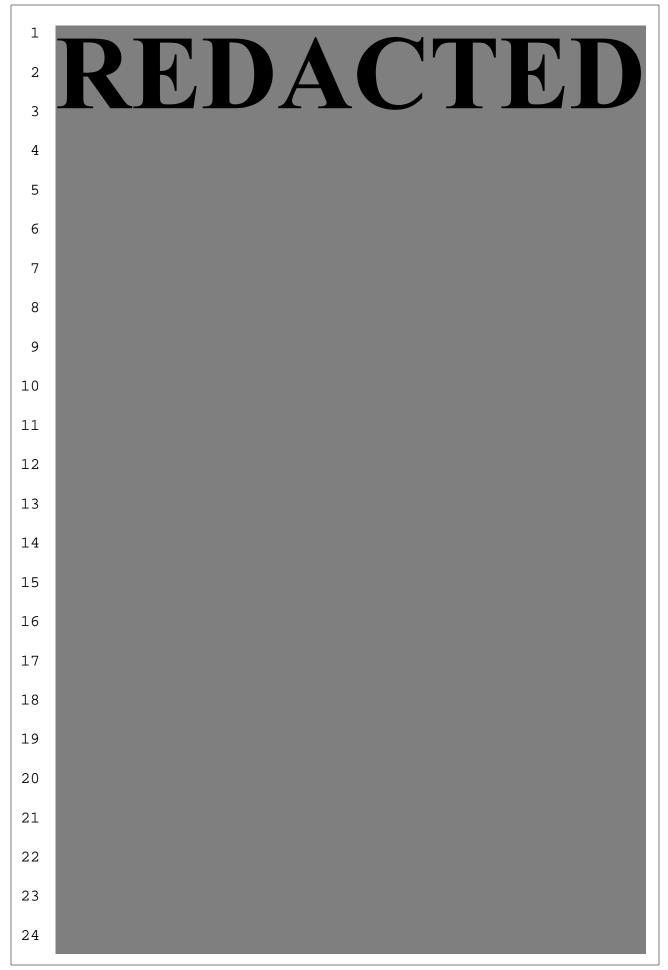


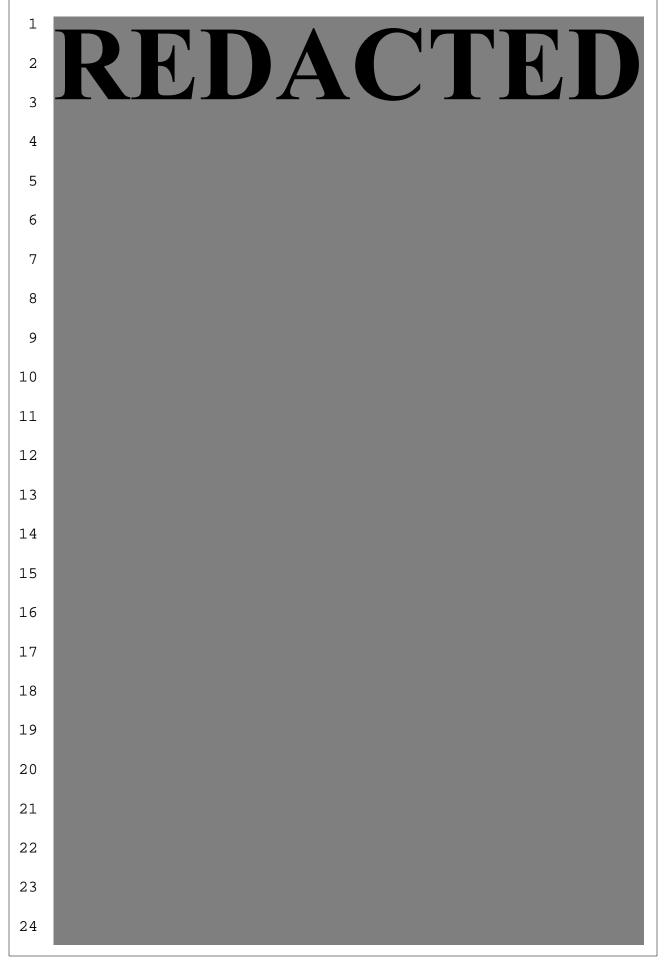


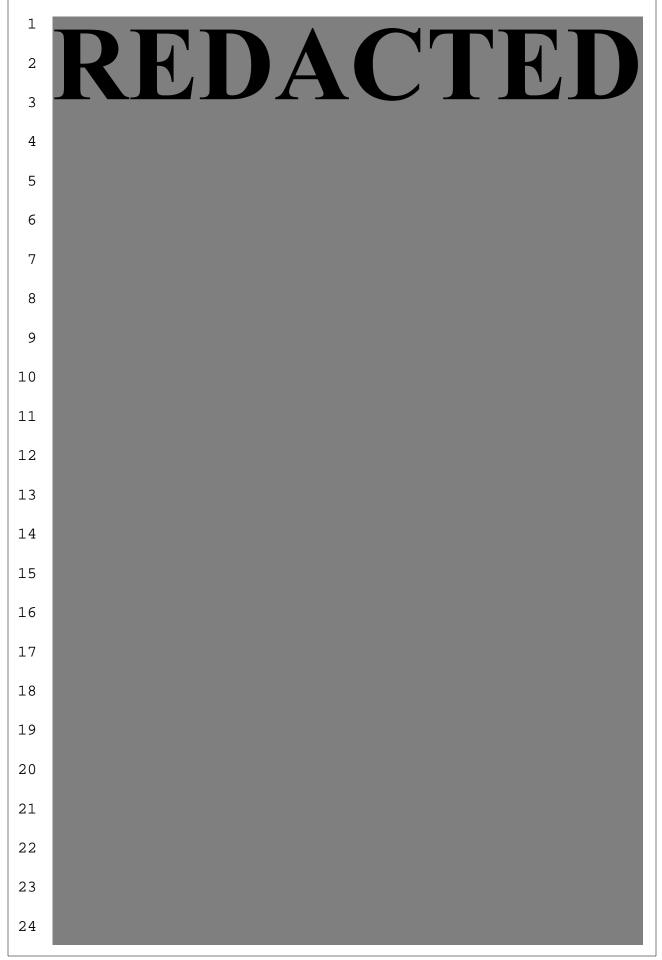


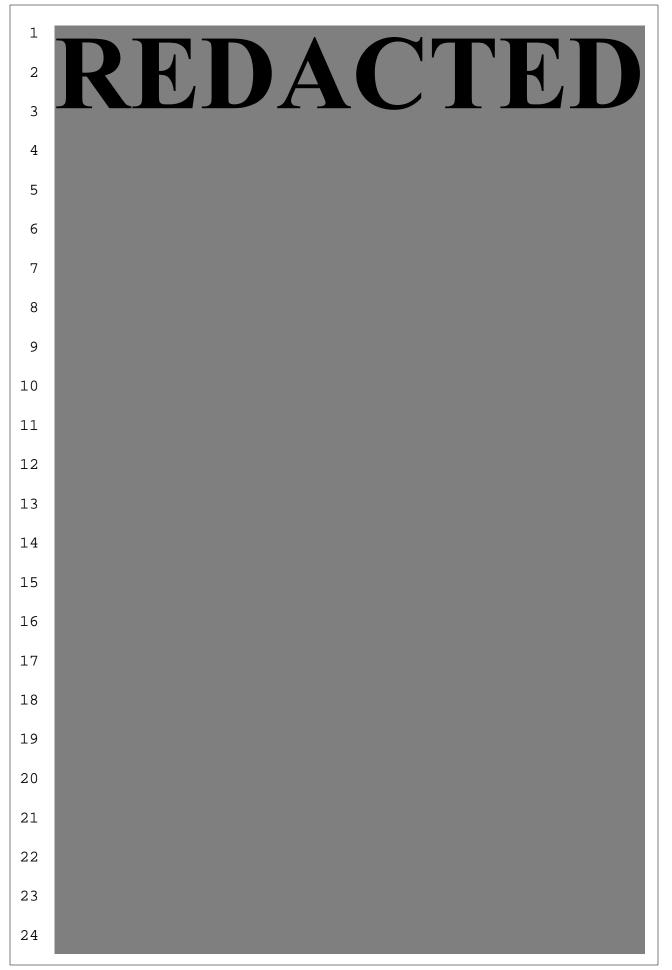


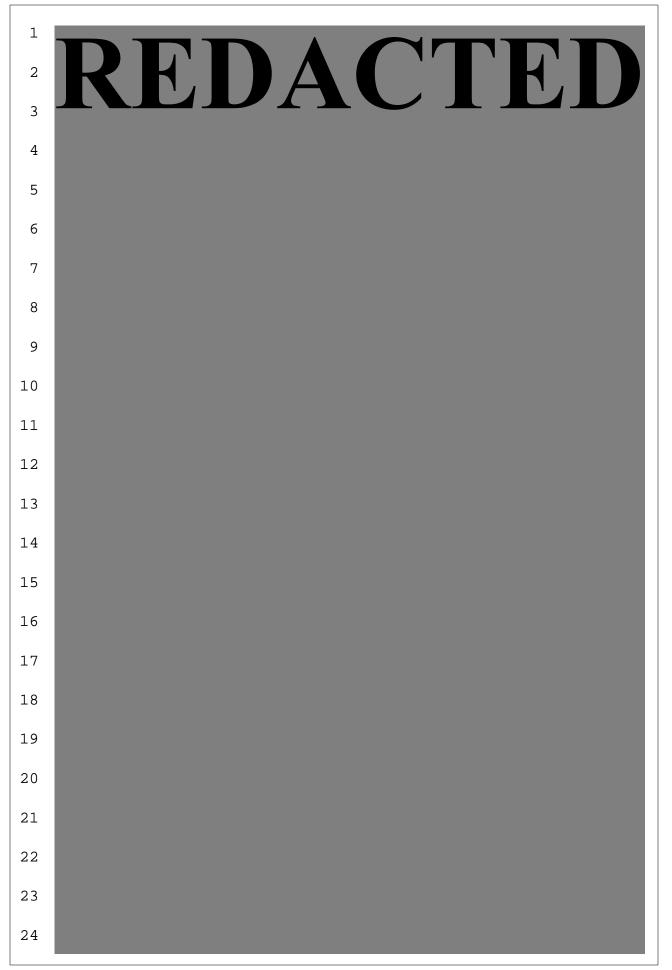


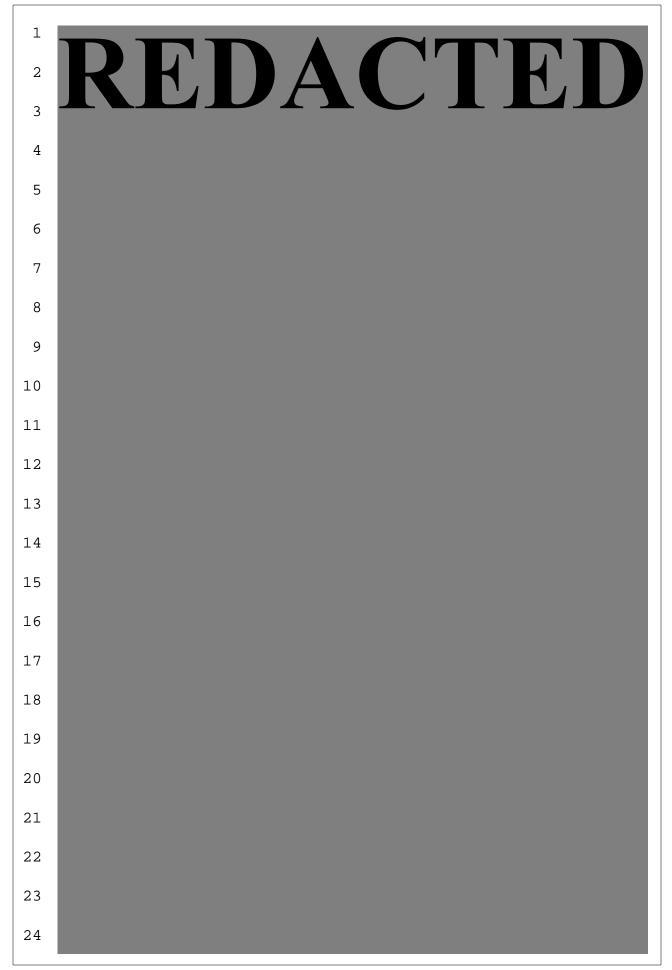


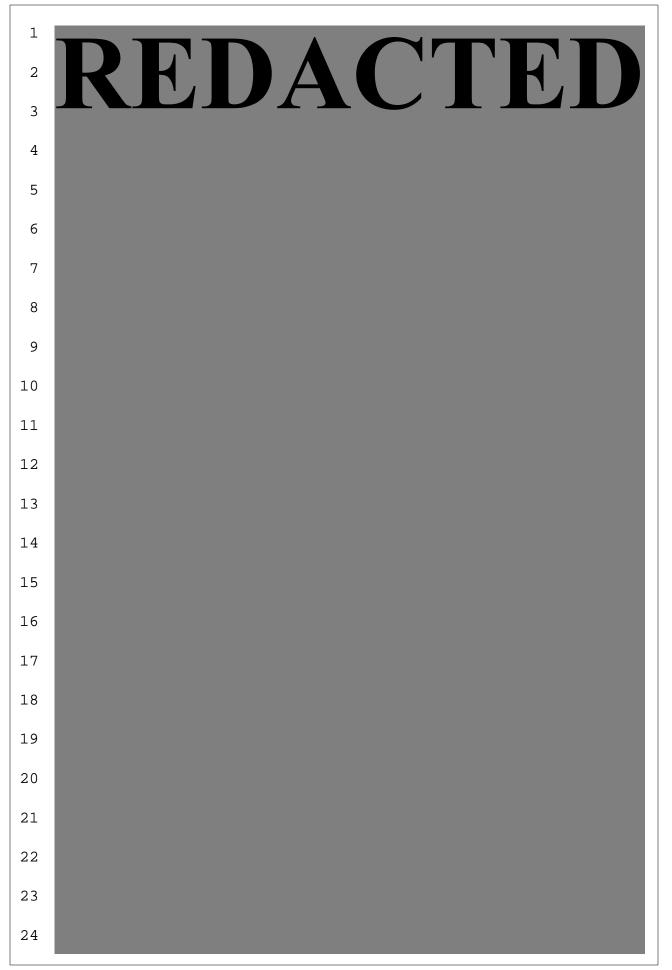


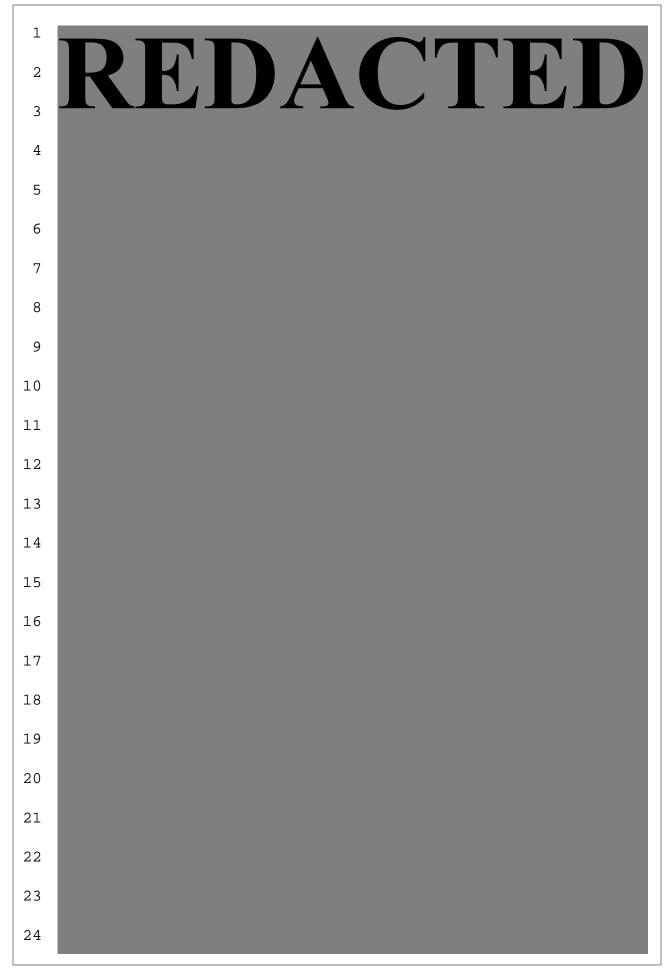


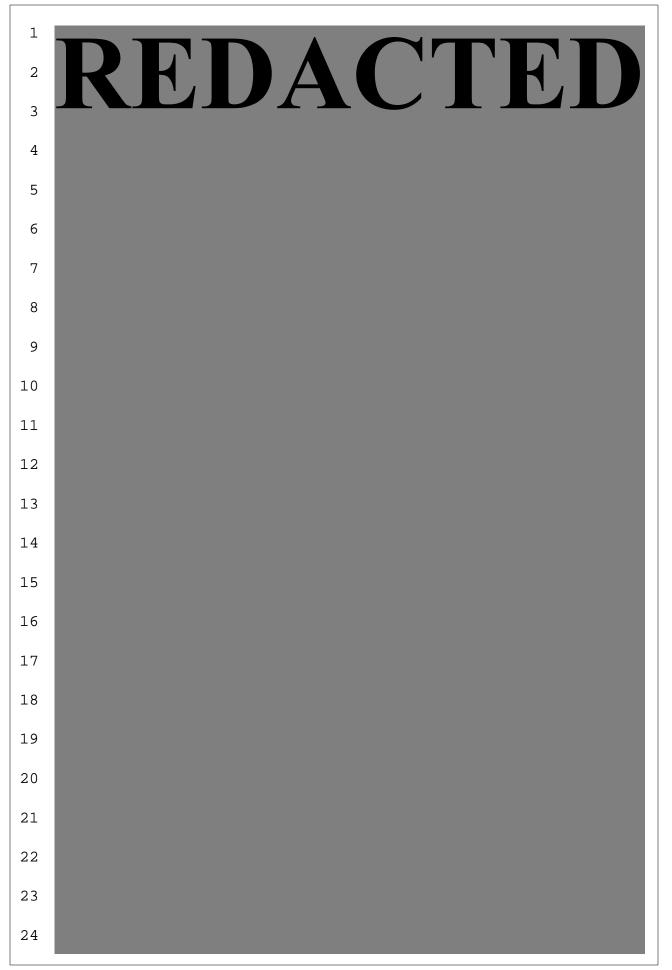


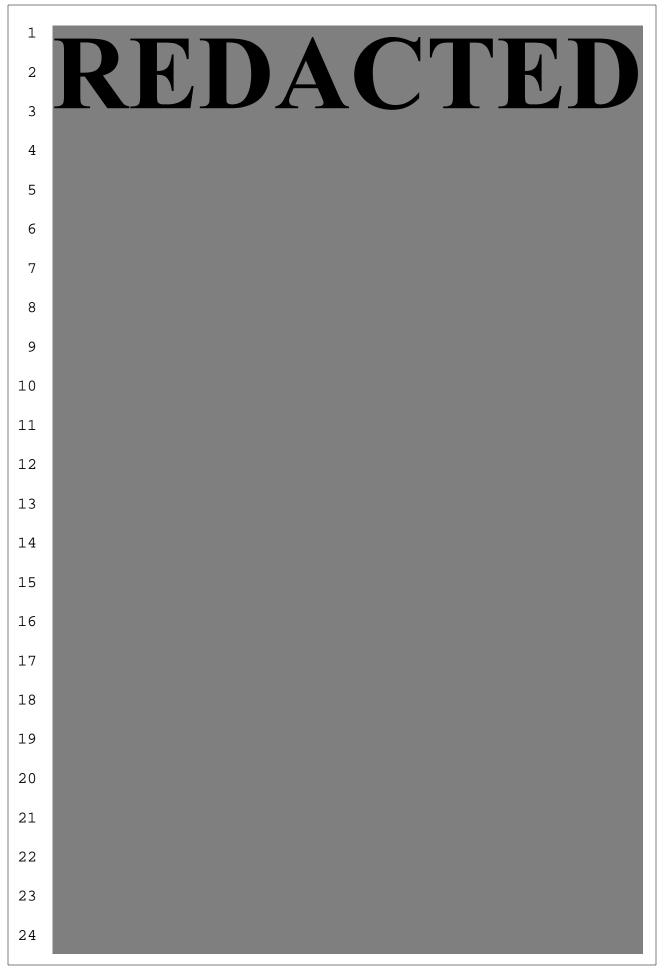


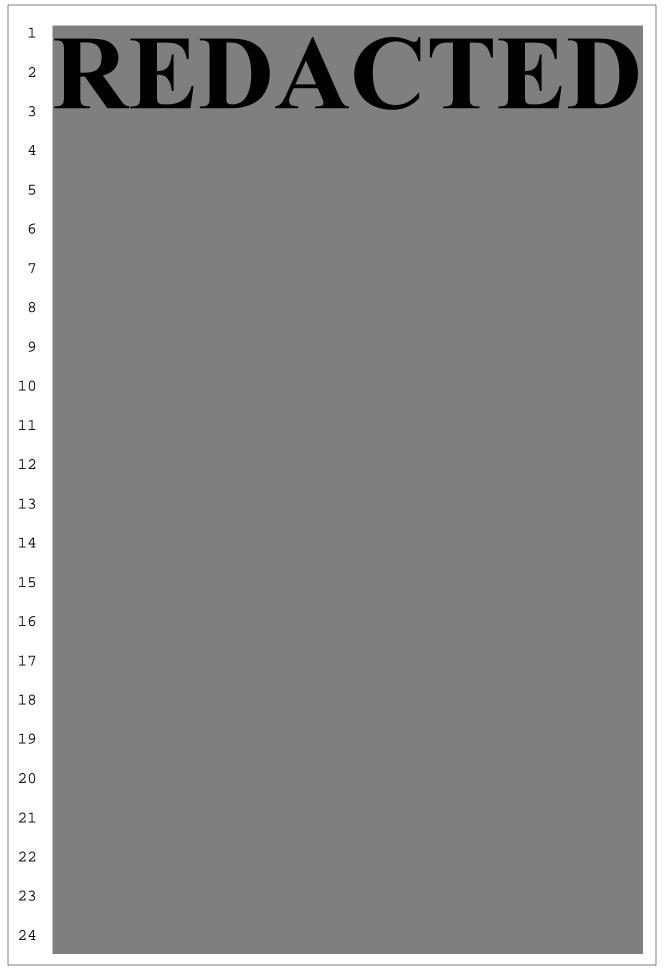


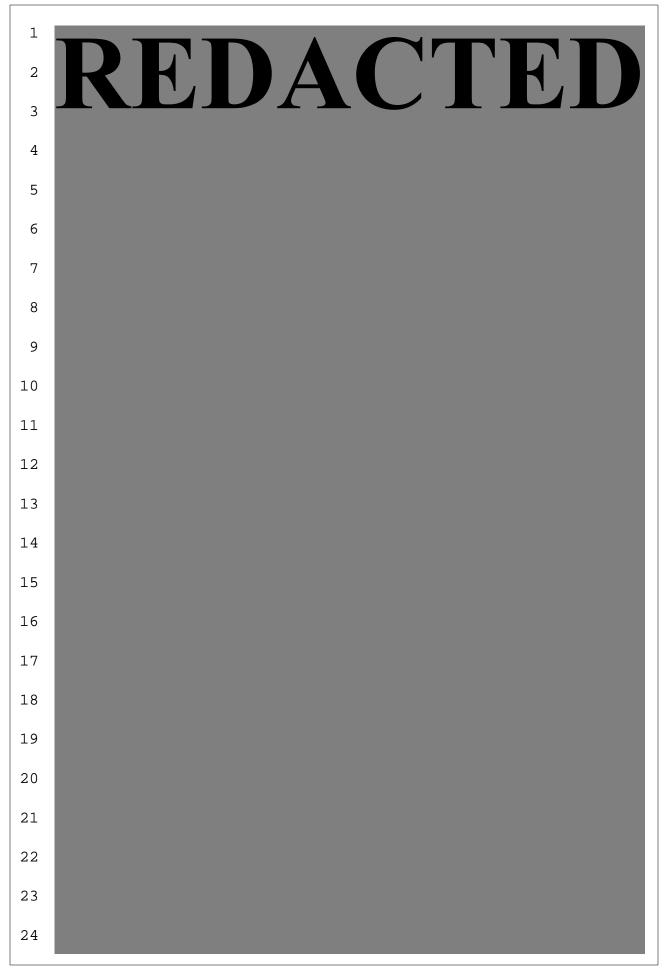


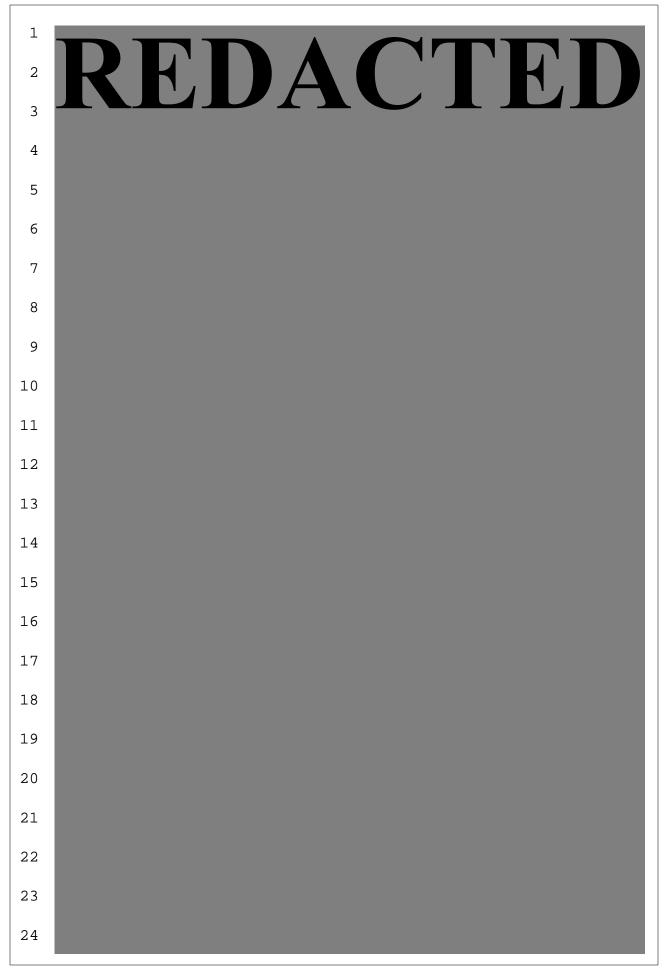


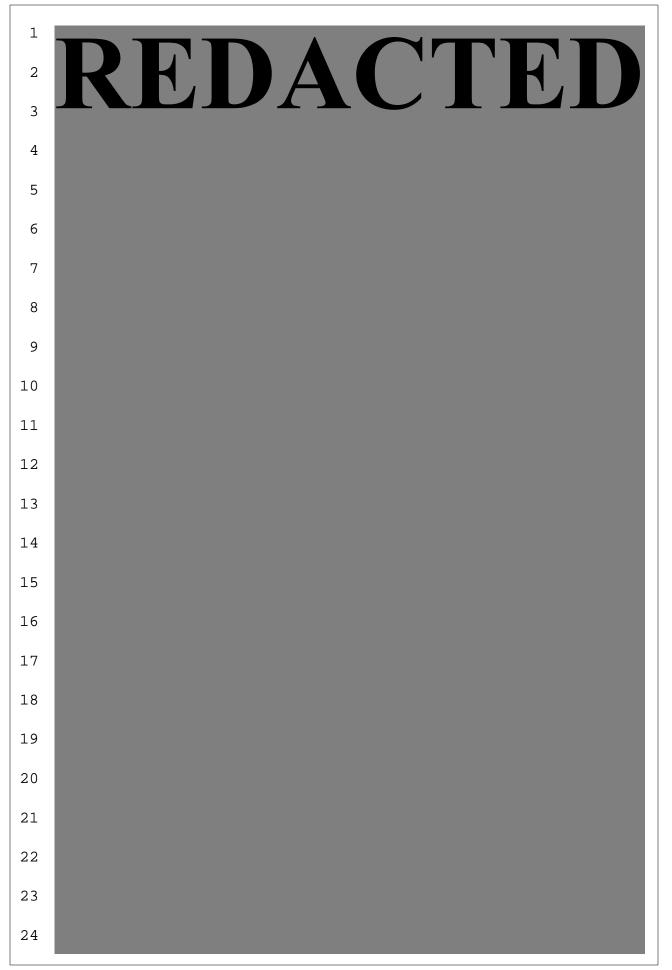


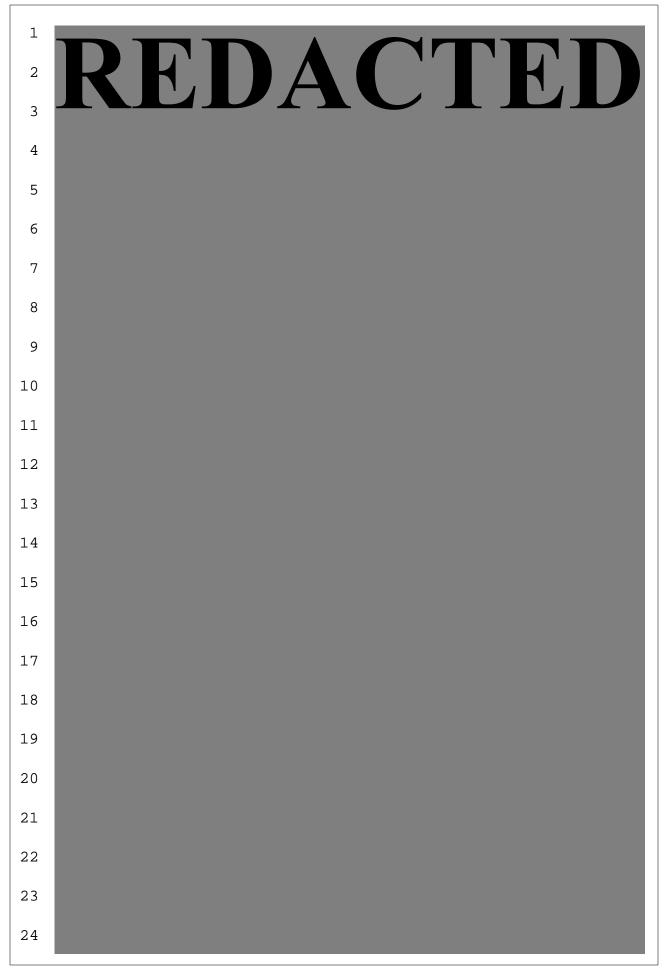


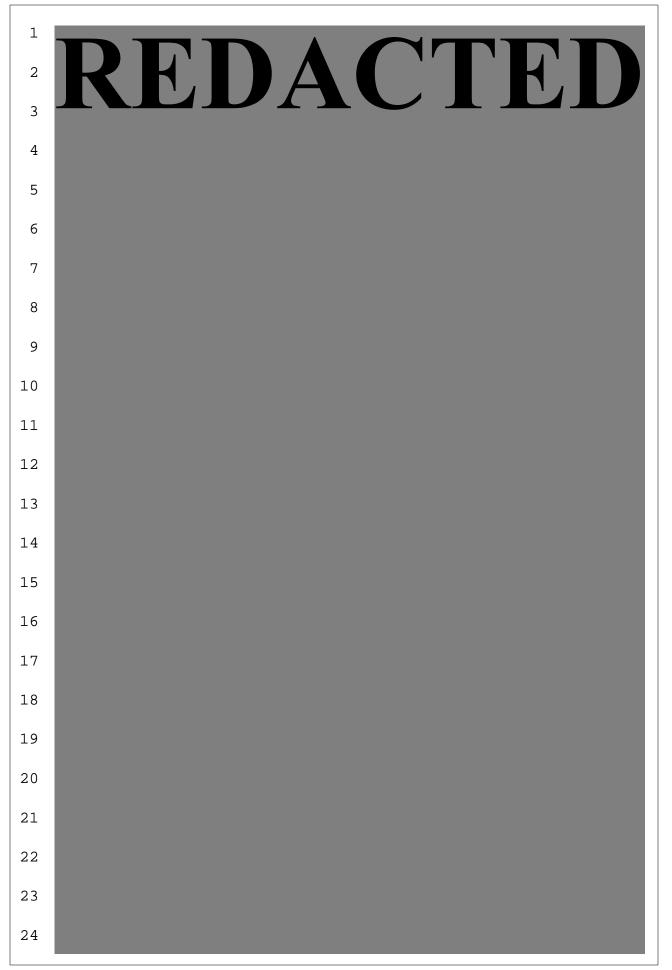


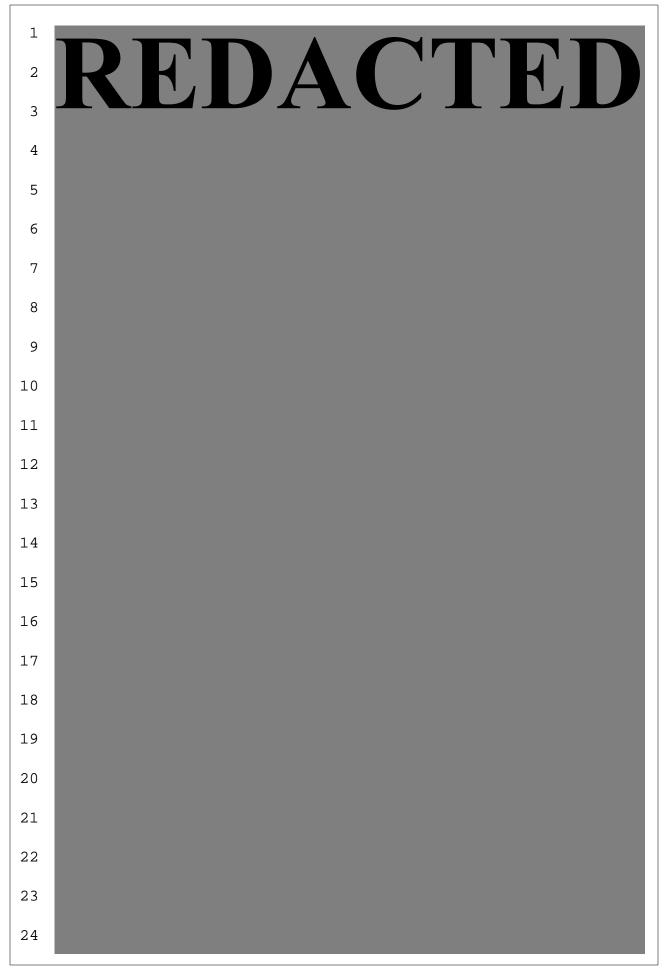


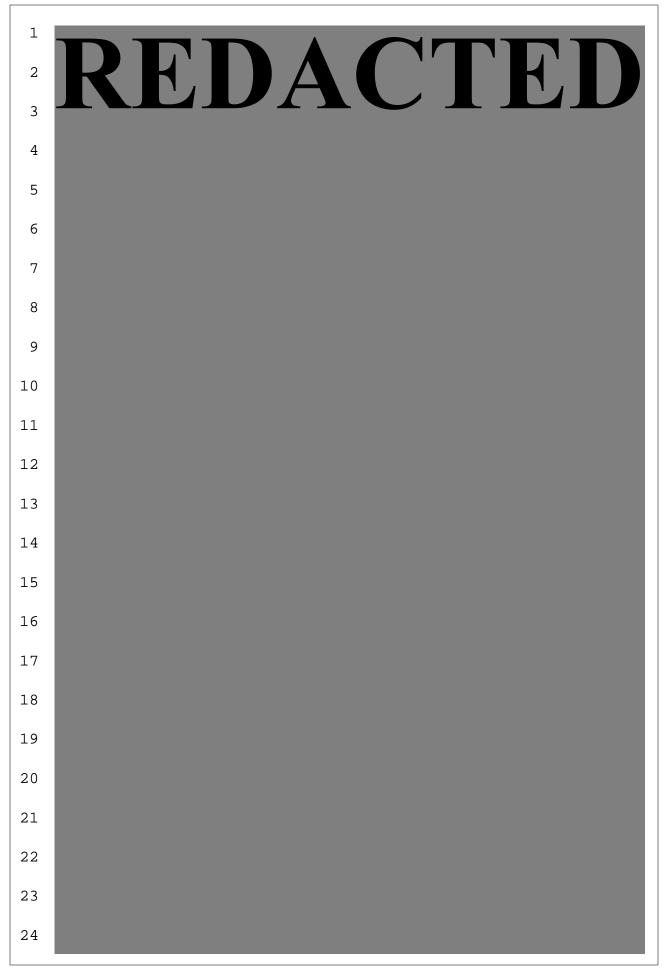


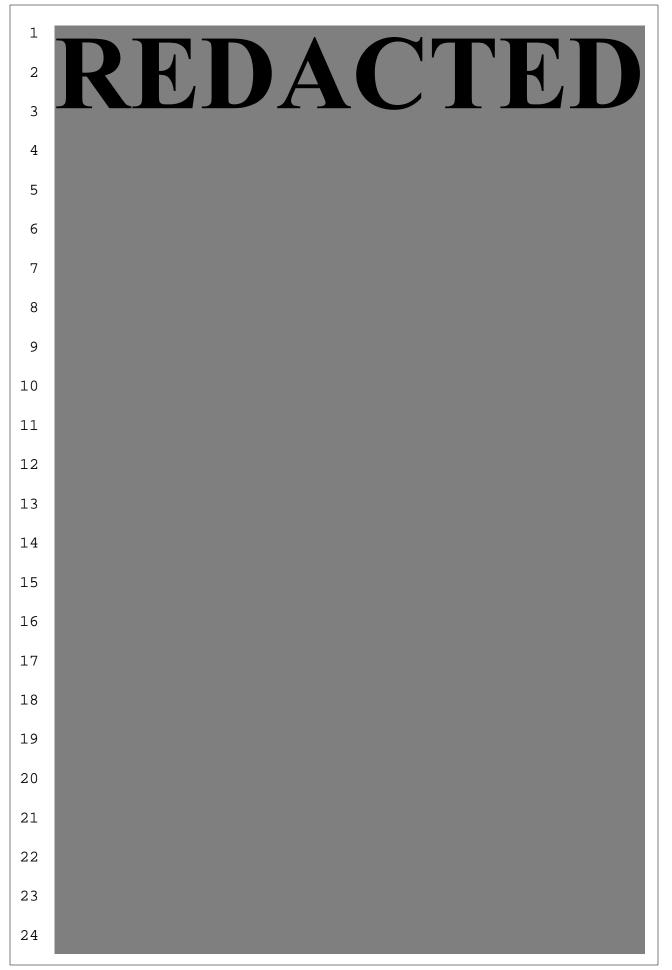


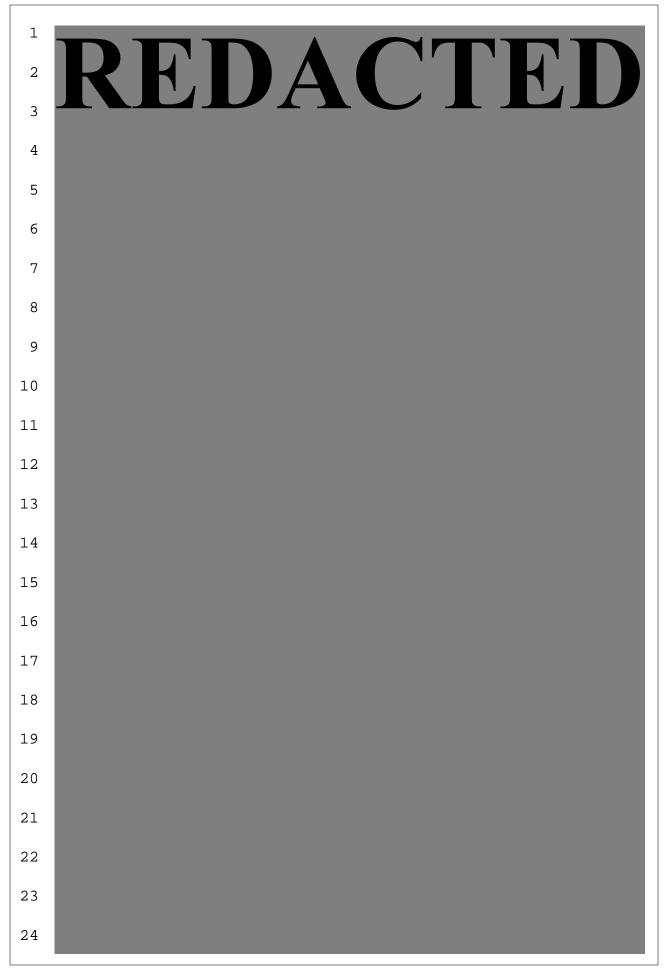


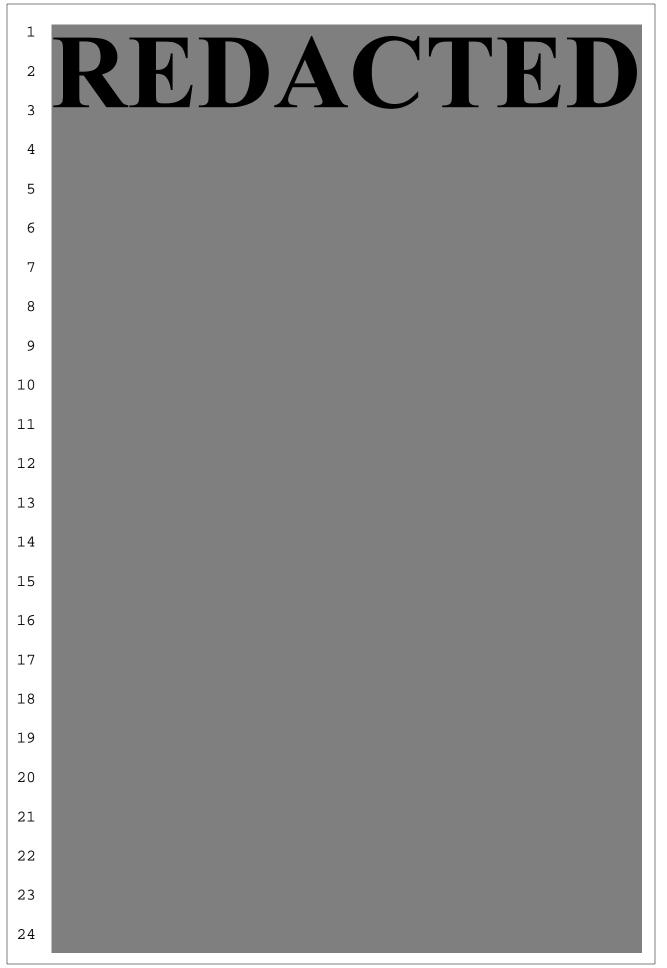


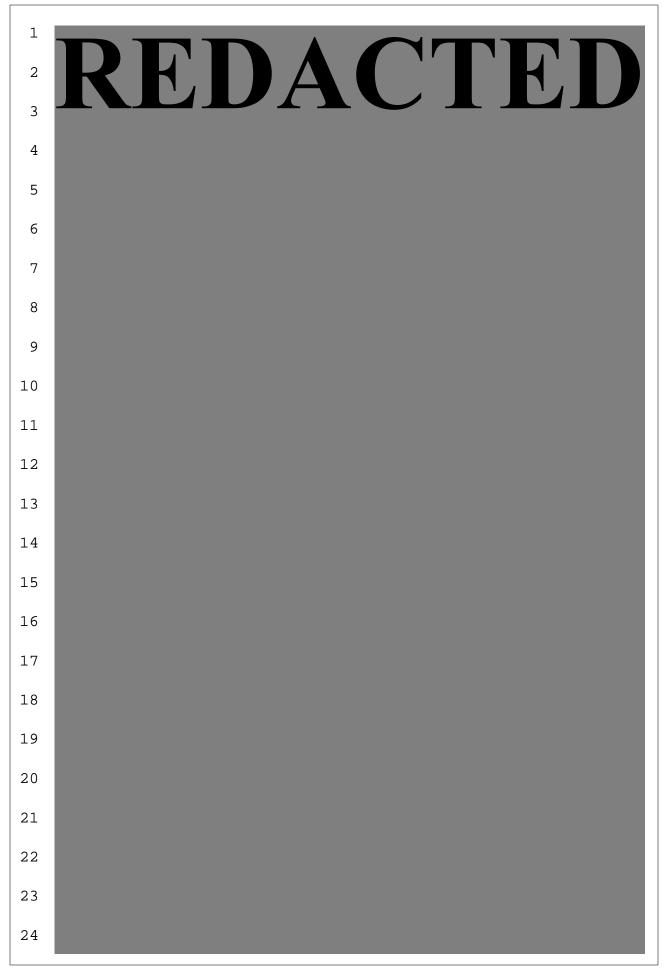


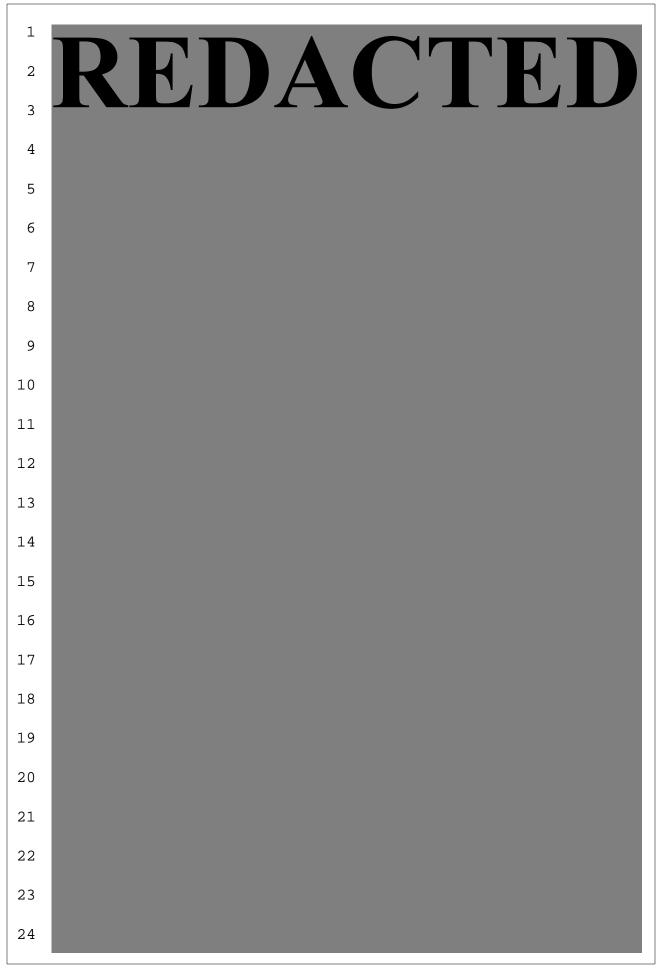


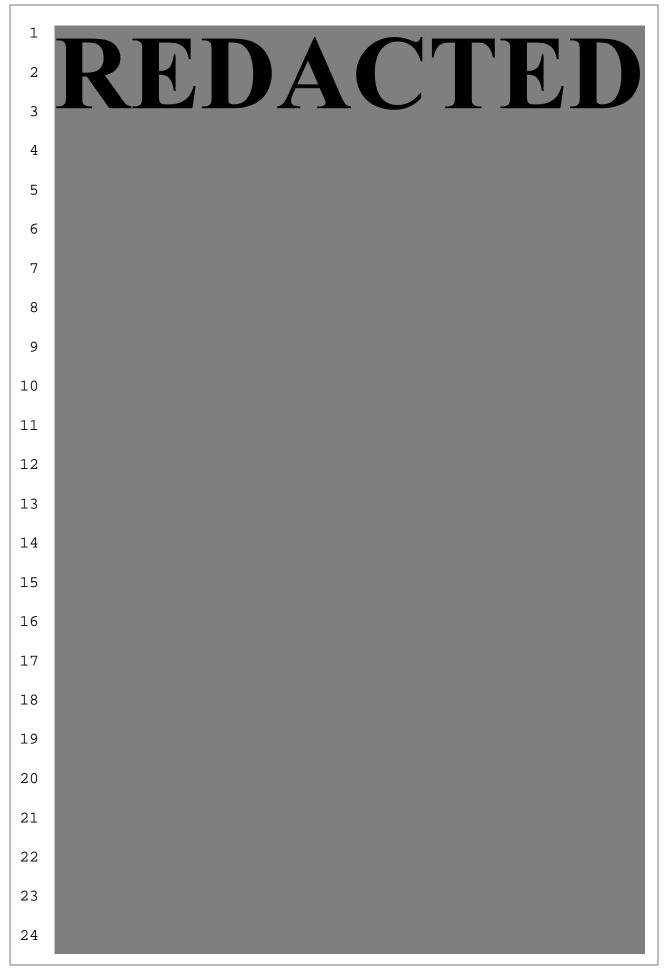


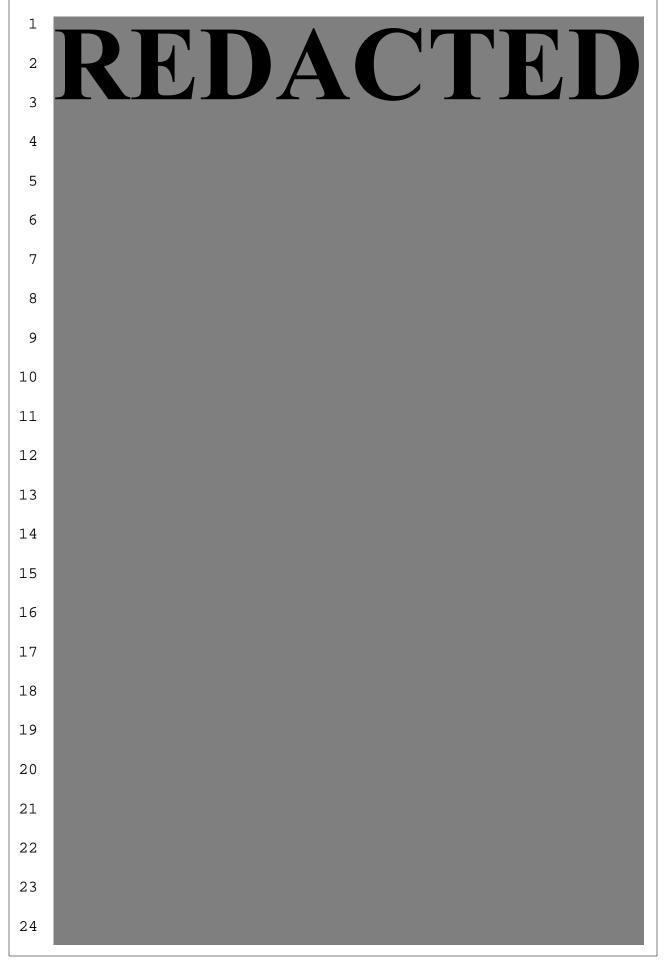


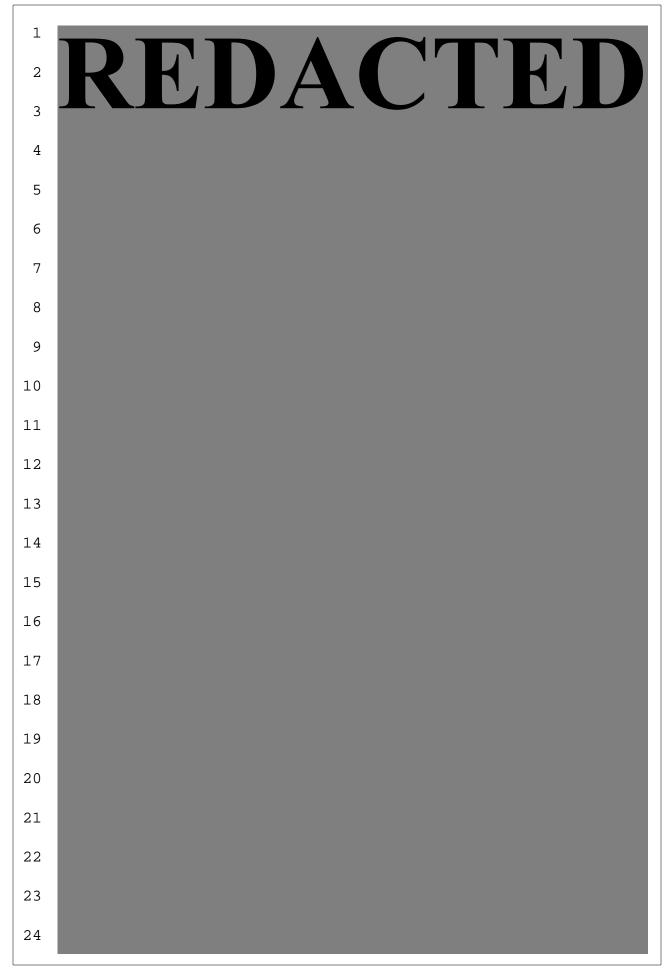












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Thereupon, at 2:29 p.m., on Wednesday,
 1
     January 16, 2019, the deposition was concluded.
 2
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Case: 1:17-md-02804-DAP Doc.#: 2177-21 Filed: 08/12/19 286 of 288 PageID.#: 322896 Highly Confidential Ty Review

| 1  | CERTIFICATE   |
|----|---|
| 2  | STATE OF OHIO :                                       |
|    | ss:   |
| 3  | COUNTY OF:  |
| 4  |   |
| 5  | I, LAURIE A. ZACCARO, do hereby certify that          |
| 6  | I have read the foregoing transcript of my            |
| 7  | cross-examination given on January 16, 2019; that     |
| 8  | together with the correction page attached hereto     |
| 9  | noting changes in form or substance, if any, it is    |
| 10 | true and correct.                                     |
| 11 |   |
|    | LAURIE A. ZACCARO                                     |
| 12 |   |
| 13 | I do hereby certify that the foregoing                |
| 14 | transcript of the cross-examination of LAURIE A.      |
| 15 | ZACCARO was submitted to the witness for reading and  |
| 16 | signing; that after she had stated to the undersigned |
| 17 | Notary Public that she had read and examined her      |
| 18 | cross-examination, she signed the same in my presence |
| 19 | on the, 2019.   |
| 20 |   |
|    |   |
| 21 | NOTARY PUBLIC - STATE OF OHIO                         |
| 22 |   |
| 23 | My Commission Expires:                                |
| 24 | ·   |

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1
                       CERTIFICATE
 2
     STATE OF OHIO
                                   SS:
 3
     COUNTY OF FRANKLIN
               I, Carol A. Kirk, a Registered Merit
 4
    Reporter and Notary Public in and for the State of
 5
    Ohio, duly commissioned and qualified, do hereby
    certify that the within-named LAURIE A. ZACCARO was by
 6
    me first duly sworn to testify to the truth, the whole
     truth, and nothing but the truth in the cause
 7
    aforesaid; that the deposition then given by her was
    by me reduced to stenotype in the presence of said
    witness; that the foregoing is a true and correct
 8
    transcript of the deposition so given by her; that the
 9
    deposition was taken at the time and place in the
     caption specified and was completed without
     adjournment; and that I am in no way related to or
10
     employed by any attorney or party hereto or
11
     financially interested in the action; and I am not,
    nor is the court reporting firm with which I am
12
     affiliated, under a contract as defined in Civil Rule
     28(D).
13
               IN WITNESS WHEREOF, I have hereunto set my
14
    hand and affixed my seal of office at Columbus, Ohio
     on this 21st day of January 2019.
15
16
17
18
                              CAROL A. KIRK, RMR
19
                              NOTARY PUBLIC - STATE OF OHIO
20
    My Commission Expires: April 9, 2022.
21
22
23
2.4
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| 1  | DEPOSITION ERRATA SHEET                               |
|----|---|
| 2  | I, LAURIE A. ZACCARO, have read the transcript        |
|    | of my deposition taken on the 16th day of January,    |
| 3  | 2019, or the same has been read to me. I request that |
|    | the following changes be entered upon the record for  |
| 4  | the reasons so indicated. I have signed the signature |
|    | page and authorize you to attach the same to the      |
| 5  | original transcript                                   |
| 6  | Page Line Correction or Change and Reason:            |
| 7  |   |
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| 21 |   |
| 22 |   |
| 23 |   |
| 24 | Date Signature  |